

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

LIBERTARIAN NATIONAL COMMITTEE

ADDRESS (number and street)

2600 Virginia Ave NW

Suite 200

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20037

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00255695

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☒

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2008

through

07

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Aaron Starr

Signature of Treasurer

Electronically Filed by Aaron Starr

Date

08

20

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
LIBERTARIAN NATIONAL COMMITTEE

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		113159.23
(b) Cash on Hand at Beginning of Reporting Period .....	65046.28	
(c) Total Receipts (from Line 19) .....	193513.82	1046770.11
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	258560.10	1159929.34
7. Total Disbursements (from Line 31) .....	221457.18	1122826.42
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	37102.92	37102.92
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	14887.64	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

LIBERTARIAN NATIONAL COMMITTEE

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	7	3	1	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	86659.52	405181.62
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	104009.30	605279.61
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	190668.82	1010461.23
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	2500.00	15365.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡	193168.82	1025826.23
12. Transfers From Affiliated/Other Party Committees .....	0.00	18200.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	345.00	2743.88
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	193513.82	1046770.11
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	193513.82	1046770.11

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		220179.54	1120977.66
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		220179.54	1120977.66
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		802.64	1198.76
24. Independent Expenditure (use Schedule E) .....		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....		475.00	650.00
(b) Political Party Committees .....		0.00	0.00
(c) Other Political Committees (such as PACs) .....		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		475.00	650.00
29. Other Disbursements.....		0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....		0.00	0.00
(ii) "Levin" Share .....		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		221457.18	1122826.42
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....		221457.18	1122826.42

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	193168.82	1025826.23
34. Total Contribution Refunds (from Line 28(d)) .....	475.00	650.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	192693.82	1025176.23
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	220179.54	1120977.66
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	345.00	2743.88
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	219834.54	1118233.78

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Michael L. Abrams

Mailing Address 2703 Westgate St

City

Houston

State

TX

Zip Code

77098-1413

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Technology Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32293

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Steve Adams

Mailing Address 620-D Autumn Crest Circle

City

Colorado Springs

State

CO

Zip Code

80919-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
agilent tech.

Occupation

engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32310

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Arnold Adicoff

Mailing Address 13952 Collier Rd

City

Grass Valley

State

CA

Zip Code

95945-9340

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Cardiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32312

Amount of Each Receipt this Period

25.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

155.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mike Alford

Mailing Address 2914 Smalley Ave

City

Mishawaka

State

IN

Zip Code

46544-3558

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Syscon International

Occupation  
Programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32323

Amount of Each Receipt this Period

35.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Luis R. Alvarez

Mailing Address 9663 Santa Monica Blvd. #381

City

Beverly Hills

State

CA

Zip Code

90210-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Student

Occupation  
Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.32339

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Steve Ames

Mailing Address 915 S 14th St

City

Lafayette

State

IN

Zip Code

47905-1503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Winstar

Occupation  
System Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32350

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

315.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Sally Amezcua

Mailing Address PO Box 1094

City

Jamul

State

CA

Zip Code

91935-1094

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32351

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Richard Amidon

Mailing Address 100 Antrim Rd

City

Hancock

State

NH

Zip Code

03449-5605

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New Hampshire Legislature

Occupation

Staff Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.32352

Amount of Each Receipt this Period

75.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Harold Anagnos

Mailing Address 50 N Brockway St Ste 3-1

City

Palatine

State

IL

Zip Code

60067-5068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lumex Inc

Occupation

President/CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.32353

Amount of Each Receipt this Period

250.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

355.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Brooke Anderson

Mailing Address 9134 134th Ct NE

City

Redmond

State

WA

Zip Code

98052-6436

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CombiMatrix Corp

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32358

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Donald Norton Anderson

Mailing Address 1885 Craigs Store Rd

City

Afton

State

VA

Zip Code

22920-2013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32360

Amount of Each Receipt this Period

25.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Douglas J. Anderson

Mailing Address 380 S Quail St

City

Lakewood

State

CO

Zip Code

80226-2534

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
City of Lakewood

Occupation  
Councilman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32361

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

105.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Enid Anderson

Mailing Address 1171 N Main St

City

Winters

State

TX

Zip Code

79567-3235

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.32363

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Gary N. Anderson

Mailing Address 6300 Noland Rd

City

Kansas City

State

MO

Zip Code

64133-4535

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UBM

Occupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.32364

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Richard Louis Anderson

Mailing Address 11075 Hillhaven Ave

City

Tujunga

State

CA

Zip Code

91042-1419

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Technicolor Creative Serv-  
ices

Occupation  
film editor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.32368

Amount of Each Receipt this Period

400.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Ruth S. Andrasco

Mailing Address 2410 Kegwood Ln

City

Bowie

State

MD

Zip Code

20715-2821

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dr. Ronald Sroka

Occupation

Medical Reception

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.32373

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Mark Antosiak

Mailing Address 3831 Norton Rd

City

Howell

State

MI

Zip Code

48843-8999

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Chem-Trend L.P.

Occupation

Regulatory Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.32415

Amount of Each Receipt this Period

150.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

David Carl Argall

Mailing Address 1300 Ballista Ave

City

La Puente

State

CA

Zip Code

91744-1608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.32422

Amount of Each Receipt this Period

200.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

J. Delvin Armstrong

Mailing Address 2224 137th PI SE

City

Bellevue

State

WA

Zip Code

98005-4032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Consulting Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.32425

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Raymond A. Arruda

Mailing Address 47 Burt St

City

Acushnet

State

MA

Zip Code

02743-1939

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32429

Amount of Each Receipt this Period

25.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Frank F. Atwood

Mailing Address 7094 S Costilla St

City

Littleton

State

CO

Zip Code

80120-3518

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.32

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32439

Amount of Each Receipt this Period

17.76

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

292.76

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 284

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mett B. Ausley

Mailing Address 3412 Waccamaw Shores Rd

City

Lake Waccamaw

State

NC

Zip Code

28450-9442

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cypress PathologyOccupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32446

Amount of Each Receipt this Period

300.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Benjamin Aycrigg

Mailing Address 3131 S Williams St

City

Englewood

State

CO

Zip Code

80113-3035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Charles Schwab & Co.Occupation  
Technical Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32448

Amount of Each Receipt this Period

35.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Benjamin Aycrigg

Mailing Address 3131 S Williams St

City

Englewood

State

CO

Zip Code

80113-3035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Charles Schwab & Co.Occupation  
Technical Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.76

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.32449

Amount of Each Receipt this Period

17.76

Contribution

SUBTOTAL of Receipts This Page (optional) .....

352.76

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Richard O. Ayres

Mailing Address 1311 Brentwood Ter

City

Eau Claire

State

WI

Zip Code

54703-1994

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Silican Graphics, Inc.

Occupation  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.32455

Amount of Each Receipt this Period

60.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Ken Bacon

Mailing Address 18 Pinewood Ln

City

Novato

State

CA

Zip Code

94947-5311

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32463

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Alvin C. Bailey

Mailing Address PO Box 611

City

Auburn

State

AL

Zip Code

36831-0611

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32477

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

160.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Brian Baker

Mailing Address 342 Frost Drive

City

Oneonta

State

AL

Zip Code

35121-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Home Appliance Service

Occupation

Operations Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.32479

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Dwight E. Baker

Mailing Address 68 Perkins Rd

City

Cartersville

State

VA

Zip Code

23027-9747

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Energy Operations

Occupation

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.32480

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Loren L. Baker

Mailing Address 1801 Rimrock Rd Apt 106

City

Barstow

State

CA

Zip Code

92311-5707

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.32481

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

380.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Loren L. Baker

Mailing Address 1801 Rimrock Rd Apt 106

City

Barstow

State

CA

Zip Code

92311-5707

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.32482

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Robert Baker

Mailing Address 4917 N 1100 W

City

Kempton

State

IN

Zip Code

46049-9229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Delco Electronics

Occupation

Tool & Die Maker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.32484

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

William Bamcer

Mailing Address 2381 Port Williams Dr

City

Stow

State

OH

Zip Code

44224-1981

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.32501

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

130.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Alan D. Bannister

Mailing Address 1340 Creekwood Cv

City

Lawrenceville

State

GA

Zip Code

30045-7100

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Poker Player

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32506

Amount of Each Receipt this Period

75.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

R. W. Baruth

Mailing Address 328 Suffolk Dr

City

Crystal Lake

State

IL

Zip Code

60014-7650

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Baruth & Assoc., Inc.

Occupation

Sales Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32541

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Chris Batchelor

Mailing Address 1276 Creek Bend Rd

City

Jacksonville

State

FL

Zip Code

32259-2923

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AT&T

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32544

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

225.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN NATIONAL COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)

Chris Beasley

Mailing Address 304 E Haloid Ave

City

Ridgecrest

State

CA

Zip Code

93555-4166

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation  
Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32570

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Jacob Beckmann

Mailing Address 26 Sunset Ct

City

Saint Louis

State

MO

Zip Code

63121-2431

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.32587

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Benjamin Q. Bell

Mailing Address 501 N Providence Rd Apt 702

City

Media

State

PA

Zip Code

19063-2546

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
El Dupont DE Nemours & Co.

Occupation  
Corporate Security Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.32604

Amount of Each Receipt this Period

25.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

155.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

John Bello

Mailing Address PO Box 168

City

Flemington

State

NJ

Zip Code

08822-0168

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Info Requested

Occupation

Info Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.32608

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

John Bello

Mailing Address PO Box 168

City

Flemington

State

NJ

Zip Code

08822-0168

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Info Requested

Occupation

Info Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.32609

Amount of Each Receipt this Period

1000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

John A. Bennett

Mailing Address 3345 Woodcock Rd

City

Sequim

State

WA

Zip Code

98382-8819

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32618

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1280.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

R. Charles Bennett

Mailing Address 971 Monroe Harbor Pl

City

Sanford

State

FL

Zip Code

32773-6493

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.32619

Amount of Each Receipt this Period

500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Pam Bensen

Mailing Address 120 N Fork Dr

City

Anderson

State

SC

Zip Code

29621-4321

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.32623

Amount of Each Receipt this Period

500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Arthur Bernard Benson

Mailing Address 14103 Double Pine Dr

City

Houston

State

TX

Zip Code

77015-1627

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.32626

Amount of Each Receipt this Period

25.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1025.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Arthur Bernard Benson

Mailing Address 14103 Double Pine Dr

City

Houston

State

TX

Zip Code

77015-1627

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

925.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.32627

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Scott Benson

Mailing Address 609 Parnel Rd

City

Old Hickory

State

TN

Zip Code

37138-1016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NW Airlines

Occupation

Pilot

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32629

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Scott Benson

Mailing Address 609 Parnel Rd

City

Old Hickory

State

TN

Zip Code

37138-1016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NW Airlines

Occupation

Pilot

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.32630

Amount of Each Receipt this Period

300.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

380.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Steven E. Benton

Mailing Address 1314 W Columbia Ave

City

Champaign

State

IL

Zip Code

61821-2645

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ISGS

Occupation  
Hydrologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.32631

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

John Alan Berkley

Mailing Address PO Box 511

City

Stockton

State

KS

Zip Code

67669-0511

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Stockton National Bank

Occupation  
Banking

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.32644

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

John Alan Berkley

Mailing Address PO Box 511

City

Stockton

State

KS

Zip Code

67669-0511

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Stockton National Bank

Occupation  
Banking

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.32645

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Theodore F. Berthelote

Mailing Address 119 Juniper Rd

City

Placitas

State

NM

Zip Code

87043-9124

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Dentist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32654

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Theodore F. Berthelote

Mailing Address 119 Juniper Rd

City

Placitas

State

NM

Zip Code

87043-9124

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Dentist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.76

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.32655

Amount of Each Receipt this Period

17.76

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Arden Bicker

Mailing Address PO Box 35348

City

Las Vegas

State

NV

Zip Code

89133-5348

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.32661

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

147.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Charles R. Bilbe

Mailing Address 1685 N Broadview Dr

City

Fayetteville

State

AR

Zip Code

72703-2008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.32673

Amount of Each Receipt this Period

500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Charles R. Bilbe

Mailing Address 1685 N Broadview Dr

City

Fayetteville

State

AR

Zip Code

72703-2008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.32674

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

John M. Bills

Mailing Address 1614 N Reid Hooker

City

Eads

State

TN

Zip Code

38028-7957

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mid South Emergency Spec-  
ialist

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32679

Amount of Each Receipt this Period

35.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

635.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Ronda Birr

Mailing Address 248 Saddle Ln

City

Floresville

State

TX

Zip Code

78114-4508

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Abbott Labs

Occupation

Financial Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32691

Amount of Each Receipt this Period

20.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Barry B. Bishop

Mailing Address 541 Hamilton St  
Apt D

City

Costa Mesa

State

CA

Zip Code

92627-8507

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AT-Tech

Occupation

Technician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32693

Amount of Each Receipt this Period

35.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Dalton Blodgett

Mailing Address 47372 State Route 20

City

Concrete

State

WA

Zip Code

98237-9484

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired (City of Everett)

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.32732

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

105.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Douglas C. Boehler

Mailing Address 828 Broadway

City

Bangor

State

PA

Zip Code

18013-2320

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AT&T

Occupation

Customer Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32755

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Michael S. Boerste

Mailing Address 158 Lake Murray Dr

City

North Augusta

State

SC

Zip Code

29841-8640

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Westinghouse

Occupation

Chemist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.32758

Amount of Each Receipt this Period

150.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Stephen Bonaventura

Mailing Address 8551 Bennington Chapel Rd

City

Centerburg

State

OH

Zip Code

43011-9316

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
City of OH

Occupation

Firefighter

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.32768

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Rick Bond

Mailing Address 10672 Hillshire Ave

City

Baton Rouge

State

LA

Zip Code

70810-0714

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32769

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Terry Bonds

Mailing Address 601 Pelham Rd S

City

Jacksonville

State

AL

Zip Code

36265-2731

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32770

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Henry Bookhardt

Mailing Address 1825 Tillery Square Ln

City

Knoxville

State

TN

Zip Code

37912-5365

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EODT

Occupation

Security

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.32780

Amount of Each Receipt this Period

250.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

330.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Dwayne S. Borgstrand

Mailing Address 832 19th St

City

State

Zip Code

Cody

WY

82414-3839

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32790

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Rev. Fil Boston

Mailing Address 917 N 16th St

City

State

Zip Code

Murray

KY

42071-1523

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Methodist Church

Occupation

Retired Local Pastor

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.37951

Amount of Each Receipt this Period

200.00

Treasurer's Best Efforts  
(See Memo)

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)

Rev. Fil Boston

Mailing Address 917 N 16th St

City

State

Zip Code

Murray

KY

42071-1523

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Methodist Church

Occupation

Retired Local Pastor

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32797

Amount of Each Receipt this Period

300.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

330.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

John M. Bowers

Mailing Address 9418 Flanders St NE

City

Minneapolis

State

MN

Zip Code

55449-5638

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wells Fargo & Co

Occupation

Senior Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.32812

Amount of Each Receipt this Period

25.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Frank J. Bowman

Mailing Address PO Box 6324

City

Laguna Niguel

State

CA

Zip Code

92607-6324

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32816

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Frank J. Bowman

Mailing Address PO Box 6324

City

Laguna Niguel

State

CA

Zip Code

92607-6324

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.32817

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

175.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Don Bowyer

Mailing Address 2596 S Willow Ct

City

Peru

State

IN

Zip Code

46970-7209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.32820

Amount of Each Receipt this Period

200.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Justin Boyd

Mailing Address 23628 81st Pl

City

Salem

State

WI

Zip Code

53168-9197

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Unemployed

Occupation

Unemployed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32822

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Brian J. Brewer

Mailing Address 7528 145th Ave NE

City

Redmond

State

WA

Zip Code

98052-4108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alstom

Occupation

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32869

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

280.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

James Brickley

Mailing Address 3936 Austin Dr

City

Columbus

State

GA

Zip Code

31909-5471

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Univ. of New Mexico

Occupation

Theater Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.32870

Amount of Each Receipt this Period

500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Larry Elton Bright

Mailing Address 925 N Santa Anita Ave

City

Arcadia

State

CA

Zip Code

91006-2329

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jet Propulsion Laboratory

Occupation

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32873

Amount of Each Receipt this Period

40.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

William Brooks

Mailing Address 10814 Pinkney Ln

City

Austin

State

TX

Zip Code

78739-1637

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Frontier Associates, LLC

Occupation

Energy Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32889

Amount of Each Receipt this Period

35.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

575.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

William Brooks

Mailing Address 10814 Pinkney Ln

City

Austin

State

TX

Zip Code

78739-1637

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Frontier Associates, LLC

Occupation

Energy Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.32890

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Todd Brown

Mailing Address 1422 13th St

City

Imperial Beach

State

CA

Zip Code

91932-3799

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
California-American Water  
Co.

Occupation

Wastes Utility Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.32910

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Torben Bruck

Mailing Address 7200 Melody Ln Unit 15

City

La Mesa

State

CA

Zip Code

91942-1405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Stratagene Cloning Systems

Occupation

Biochemical Engineers

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32911

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Harold Brumm

Mailing Address 3091 S Woodrow St

City

Arlington

State

VA

Zip Code

22206-2114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.32914

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Arno C. Buhner

Mailing Address 755 Patricia Ave

City

Ann Arbor

State

MI

Zip Code

48103-2629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bechtel

Occupation

Engineer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.32942

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Harold Bumgardner

Mailing Address 599 Blue Wing Loop SE

City

Ocean Shores

State

WA

Zip Code

98569-9692

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.32949

Amount of Each Receipt this Period

60.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

210.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Michael R. Burris

Mailing Address 1923 Ravenscroft Dr

City

Austin

State

TX

Zip Code

78748-3423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Auditor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32969

Amount of Each Receipt this Period

500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Michael R. Burris

Mailing Address 1923 Ravenscroft Dr

City

Austin

State

TX

Zip Code

78748-3423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Auditor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.32970

Amount of Each Receipt this Period

300.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Wallace Howard Burton

Mailing Address 213 S 4th St

City

Festus

State

MO

Zip Code

63028-2210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32974

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Wallace Howard Burton

Mailing Address 213 S 4th St

City

Festus

State

MO

Zip Code

63028-2210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32975

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Wallace Howard Burton

Mailing Address 213 S 4th St

City

Festus

State

MO

Zip Code

63028-2210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.32976

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Bob Byrnes

Mailing Address PO Box 967

City

Keystone Heights

State

FL

Zip Code

32656-0967

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed (Trail Ridge  
Nursery)

Occupation  
Nurseryman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33001

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

230.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

D. J. Cahill

Mailing Address 23212 Peach Tree Road

City

Clarksburg

State

MD

Zip Code

20871-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33006

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Bob W. Callahan

Mailing Address 41 Basswood Dr

City

Felton

State

DE

Zip Code

19943-6106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.69

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33010

Amount of Each Receipt this Period

41.67

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Richard Carnal

Mailing Address 75 Keokuk Rd

City

Royersford

State

PA

Zip Code

19468-3036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33049

Amount of Each Receipt this Period

15.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

106.67

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Richard Carnal

Mailing Address 75 Keokuk Rd

City

Royersford

State

PA

Zip Code

19468-3036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.33050

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Carl Case

Mailing Address 816 Lenlock Dr SE

City

Huntsville

State

AL

Zip Code

35802-1928

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.33083

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Irvin Eugene Chambers

Mailing Address 2160 Menalto Ave

City

Menlo Park

State

CA

Zip Code

94025-2557

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rinn & Peterson

Occupation

CAD Draftsman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.33098

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Gardner Champlin

Mailing Address 1111 Bonforte Blvd

City

Pueblo

State

CO

Zip Code

81001-1801

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.33100

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Allen E. Chantelois

Mailing Address 5555 N Meade St

City

Appleton

State

WI

Zip Code

54913-8382

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CHN

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33109

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Lawrence A. Ciano

Mailing Address 425 Summit Trl

City

Boerne

State

TX

Zip Code

78006-7017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.33135

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Lawrence A. Ciano

Mailing Address 425 Summit Trl

City

Boerne

State

TX

Zip Code

78006-7017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

Letter Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.33136

Amount of Each Receipt this Period

20.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Felisa C. Clark

Mailing Address 2124 SW 170th St

City

Burien

State

WA

Zip Code

98166-3348

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.33148

Amount of Each Receipt this Period

125.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

William Mark Clifford

Mailing Address 2786 Palo Verde Dr

City

Avon Park

State

FL

Zip Code

33825-8964

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Soil and Water Cons Brd

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33162

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

175.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Martin H. Coalson

Mailing Address 16760 L Cir

City

Omaha

State

NE

Zip Code

68135-1326

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
union pacific

Occupation

Marketing Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33168

Amount of Each Receipt this Period

15.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Michael C. Colley

Mailing Address 444 Magnolia Dr

City

Gulf Shores

State

AL

Zip Code

36542-4408

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired (U.S. Navy)

Occupation

Vice Admiral, Ret.

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33189

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Michael C. Colley

Mailing Address 444 Magnolia Dr

City

Gulf Shores

State

AL

Zip Code

36542-4408

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired (U.S. Navy)

Occupation

Vice Admiral, Ret.

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2375.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33190

Amount of Each Receipt this Period

150.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

265.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Michael C. Colley

Mailing Address 444 Magnolia Dr

City

Gulf Shores

State

AL

Zip Code

36542-4408

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired (U.S. Navy)

Occupation

Vice Admiral, Ret.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2392.76

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.33191

Amount of Each Receipt this Period

17.76

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Michael C. Colley

Mailing Address 444 Magnolia Dr

City

Gulf Shores

State

AL

Zip Code

36542-4408

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired (U.S. Navy)

Occupation

Vice Admiral, Ret.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2492.76

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.33192

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

John A. Collins

Mailing Address 318 Indian Trce # 126

City

Weston

State

FL

Zip Code

33326-2996

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Broward Community College

Occupation

Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.33195

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

147.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

John A. Collins

Mailing Address 318 Indian Trce # 126

City

Weston

State

FL

Zip Code

33326-2996

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Broward Community College

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.33196

Amount of Each Receipt this Period

25.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Wayne Confer

Mailing Address 3321 Edinburgh Rd

City

Allentown

State

PA

Zip Code

18104-2617

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33209

Amount of Each Receipt this Period

85.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Eugene J. Conway

Mailing Address 7769 E Marquise Dr

City

Tucson

State

AZ

Zip Code

85715-3777

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Tile Company

Occupation  
Sole Proprietor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33217

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

210.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 284

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Michael R. L. Coon

Mailing Address 1603 Pleasant Ln

City

Copperas Cove

State

TX

Zip Code

76522-4233

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Baylor U

Occupation

Graduate Teaching Assistant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1175.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	0	8

Transaction ID: SA11AI.33229

Amount of Each Receipt this Period

25.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Eric Cooper

Mailing Address 902 Burnett Ave

City

Ames

State

IA

Zip Code

50010-6132

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Iowa State Univ.

Occupation

Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	0	8

Transaction ID: SA11AI.33230

Amount of Each Receipt this Period

40.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

John M. Corboy

Mailing Address 95-717 Kipapa Dr Apt 23

City

Mililani

State

HI

Zip Code

96789-1038

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Corboy Ltd. Partnership

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	0	8

Transaction ID: SA11AI.33239

Amount of Each Receipt this Period

200.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

265.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Curtis Cornell

Mailing Address 414 Lincoln Ave

City

Alameda

State

CA

Zip Code

94501-3236

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Comcast

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33245

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Mike Corvin

Mailing Address 3516 Bermuda Dr

City

Birmingham

State

AL

Zip Code

35210-3004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hoover Toyota, Inc.

Occupation

Parts Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.33252

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Don Cowles

Mailing Address 2437 Green View Pl

City

Los Angeles

State

CA

Zip Code

90046-1410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cowles, Sabol & Co Inc

Occupation

Stockbroker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33264

Amount of Each Receipt this Period

84.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

364.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN NATIONAL COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)

Robert Crossman

Mailing Address 2409 Sundial Ct

City

Fort Myers

State

FL

Zip Code

33908-1623

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.33295

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Brent Danning

Mailing Address 1001 W 17th St

City

Austin

State

TX

Zip Code

78701-1008

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.33345

Amount of Each Receipt this Period

1000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Paul C. Darrow

Mailing Address 4628 Turnerville Rd

City

Bedford

State

WY

Zip Code

83112-9716

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.33355

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Stephen L. Dasbach

Mailing Address 2803 Flagmaker Dr

City

Falls Church

State

VA

Zip Code

22042-2204

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FCPS

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33356

Amount of Each Receipt this Period

20.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Barbara L. Davis

Mailing Address 417 Aldama Ave

City

Lady Lake

State

FL

Zip Code

32159-9283

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33369

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Jeremy S. Davis

Mailing Address 7539 Brompton St

City

Houston

State

TX

Zip Code

77025-2267

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33379

Amount of Each Receipt this Period

300.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

420.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Jeremy S. Davis

Mailing Address 7539 Brompton St

City

Houston

State

TX

Zip Code

77025-2267

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.33380

Amount of Each Receipt this Period

1000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Lynden F. Davis

Mailing Address 555 Pierce St Apt 1305

City

Albany

State

CA

Zip Code

94706-1004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.33382

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Paul Davis

Mailing Address 4508 E Camino Segundo

City

Sierra Vista

State

AZ

Zip Code

85650-9450

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Davis Company

Occupation

Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33385

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Elizabeth Deforest

Mailing Address 1336 Princeton St Apt 3

City

Santa Monica

State

CA

Zip Code

90404-2420

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.69

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33401

Amount of Each Receipt this Period

41.67

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Elizabeth Deforest

Mailing Address 1336 Princeton St Apt 3

City

Santa Monica

State

CA

Zip Code

90404-2420

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.69

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.33402

Amount of Each Receipt this Period

25.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Carolyn DeJager

Mailing Address 8622 Plainfield Ln

City

Cincinnati

State

OH

Zip Code

45236-1704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.33406

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

166.67

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 284

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Everett J. DeJager

Mailing Address 8622 Plainfield Ln

City

Cincinnati

State

OH

Zip Code

45236-1704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	0	8

Transaction ID: SA11AI.33407

Amount of Each Receipt this Period

55.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Michael De Mello

Mailing Address 370 Park Ave # 75

City

New York

State

NY

Zip Code

10022-5909

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Financial Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	0	8

Transaction ID: SA11AI.33393

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Robert A. Dempsey

Mailing Address PO Box 1710

City

Telluride

State

CO

Zip Code

81435-1710

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rocky Realty, LLCOccupation  
Real Estate Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	0	8

Transaction ID: SA11AI.33417

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

185.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Alicia Dickinson

Mailing Address 40950 25th St W

City

Palmdale

State

CA

Zip Code

93551-2327

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired Morgan Stanly

Occupation

retired Morgan Stanly

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.33446

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Damon Z. Dillon

Mailing Address 10534 Antioch Rd

City

Tremont

State

IL

Zip Code

61568-9305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.33452

Amount of Each Receipt this Period

25.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Elaine DiMasi

Mailing Address 16 Old Rocky Point Rd

City

Miller Place

State

NY

Zip Code

11764-2026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brookhaven Nat'l Labs

Occupation

Research Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33453

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

305.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Elaine DiMasi

Mailing Address 16 Old Rocky Point Rd

City

Miller Place

State

NY

Zip Code

11764-2026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brookhaven Nat'l Labs

Occupation

Research Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.26

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.33454

Amount of Each Receipt this Period

17.76

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Jeffrey L. Dimit

Mailing Address 321 Amy Dr

City

Goose Creek

State

SC

Zip Code

29445-3535

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US Gov't

Occupation

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33456

Amount of Each Receipt this Period

20.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Patrick J. Dixon

Mailing Address 5002 Sundown St

City

Lago Vista

State

TX

Zip Code

78645-6066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DPAS INC

Occupation

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3795.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33462

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

87.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

George Donnelly

Mailing Address 1903 60th PI E Ste M2261

City

Bradenton

State

FL

Zip Code

34203-5036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
High Speed Rails incorpor-  
ated

Occupation

Systems Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33481

Amount of Each Receipt this Period

500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Neal Donner

Mailing Address 2739 S Westgate Ave

City

Los Angeles

State

CA

Zip Code

90064-3527

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33482

Amount of Each Receipt this Period

10.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Neal Donner

Mailing Address 2739 S Westgate Ave

City

Los Angeles

State

CA

Zip Code

90064-3527

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.33483

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

610.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Neal Donner

Mailing Address 2739 S Westgate Ave

City

Los Angeles

State

CA

Zip Code

90064-3527

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.33484

Amount of Each Receipt this Period

99.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Anna Dooley

Mailing Address West Point Retirement Community  
5101 Northpointe Pkwy Apt 227

City

Pensacola

State

FL

Zip Code

32514-7852

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
E. B. R. Pamish School Bo-  
ard

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.33488

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Duane W. Dossinger

Mailing Address 2198 County Road 95

City

Florence

State

CO

Zip Code

81226-9513

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.33489

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

299.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Wade Dowdell

Mailing Address PO Box 697

City

Clements

State

CA

Zip Code

95227-0697

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Teleline Networks

Occupation

Linguist Transcriber

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.33496

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Michael L. Dudley

Mailing Address 4680 E McCloy Ave

City

Port Clinton

State

OH

Zip Code

43452-4231

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33524

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Katherine Duree

Mailing Address 724 S 10th St Apt 2R

City

Philadelphia

State

PA

Zip Code

19147-1973

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.33556

Amount of Each Receipt this Period

500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

780.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Paul D. Eccles

Mailing Address PO Box 1943

City

Huntington Beach

State

CA

Zip Code

92647-1943

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Logicon-INRI

Occupation

Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33584

Amount of Each Receipt this Period

35.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Mark Edgar

Mailing Address PO Box 87195

City

Phoenix

State

AZ

Zip Code

85080-7195

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MCCCD

Occupation

programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33592

Amount of Each Receipt this Period

20.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Patrick Edwards

Mailing Address PO Box 244892

City

Anchorage

State

AK

Zip Code

99524-4892

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Recon Engineering

Occupation

Drafter

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.33598

Amount of Each Receipt this Period

177.60

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

232.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Terrill I. Elniff

Mailing Address 21 Lynnstone Ct

City

Asheville

State

NC

Zip Code

28805-1905

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33625

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

John P. Evans

Mailing Address 515 Lake St S Apt 305

City

Kirkland

State

WA

Zip Code

98033-6446

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Solutions, IQ

Occupation

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.33662

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Richard Evey

Mailing Address 4150 Trim Tree Dr

City

Morganton

State

NC

Zip Code

28655-8431

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33666

Amount of Each Receipt this Period

45.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

175.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Gregory M. Fahy

Mailing Address 880 Via Blairo

City

Corona

State

CA

Zip Code

92879-8245

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
21st Century Medicine

Occupation  
Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33674

Amount of Each Receipt this Period

15.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Kevin Farnham

Mailing Address 44 Glover St

City

San Francisco

State

CA

Zip Code

94109-2105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.33679

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

John A. Fehsenfeld

Mailing Address PO Box 15567

City

Las Vegas

State

NV

Zip Code

89114-5567

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33695

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

295.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

John A. Fehsenfeld

Mailing Address PO Box 15567

City

Las Vegas

State

NV

Zip Code

89114-5567

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.33696

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Michael Fein

Mailing Address 28 Papworth Ave

City

Metairie

State

LA

Zip Code

70005-4204

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
W&T Offshore Inc

Occupation  
Geologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33698

Amount of Each Receipt this Period

25.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Fred Dan Fernandes

Mailing Address 2201 Stratford Way

City

La Verne

State

CA

Zip Code

91750-5143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Raytheon

Occupation  
Retired Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.33718

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

225.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Fred Dan Fernandes

Mailing Address 2201 Stratford Way

City

La Verne

State

CA

Zip Code

91750-5143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Raytheon

Occupation

Retired Engineer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.33719

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Robert G. Fletcher

Mailing Address 1214 Getty St S

City

Sauk Centre

State

MN

Zip Code

56378-1432

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.33765

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Douglas Floyd

Mailing Address 3336 Therondunn Dr

City

Plano

State

TX

Zip Code

75023-6208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Attorney

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.33769

Amount of Each Receipt this Period

250.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Julian Fondren

Mailing Address 217 Cardinal Ct

City

Hartsville

State

SC

Zip Code

29550-2873

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United States Air Force

Occupation  
Military

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33778

Amount of Each Receipt this Period

85.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Robert Ford

Mailing Address 57 Military Dr

City

Mountain Home

State

AR

Zip Code

72653-5810

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MCAMA

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33782

Amount of Each Receipt this Period

85.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Sara M. Foster

Mailing Address 6416 Wedgeview Dr

City

Tucker

State

GA

Zip Code

30084-8701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Emory University Hosp

Occupation  
RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33792

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Heather Foti

Mailing Address 420 E Ohio St Apt 29A

City

Chicago

State

IL

Zip Code

60611-4663

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33794

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Julia Fox

Mailing Address 536 S 5th St

City

West Dundee

State

IL

Zip Code

60118-2828

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bell Flavors & Fragrances

Occupation

Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33805

Amount of Each Receipt this Period

25.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Steven Fox

Mailing Address 25 Cushing Dr

City

Mill Valley

State

CA

Zip Code

94941-1060

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.33809

Amount of Each Receipt this Period

250.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

375.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 284

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Kurtis Wayne Fuessley

Mailing Address PO Box 62

City

Coggon

State

IA

Zip Code

52218-0062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rockwell Collins

Occupation

Maintenance Mechanic

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	0	8

Transaction ID: SA11AI.33845

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Michael Anthony Fusaro

Mailing Address 3196 Perryville Rd

City

Canastota

State

NY

Zip Code

13032-4799

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Transaver LLC

Occupation

IT Manager

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	0	8

Transaction ID: SA11AI.33851

Amount of Each Receipt this Period

25.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Virginia Gallenberger

Mailing Address 1831 NW 45th Ter

City

Ocala

State

FL

Zip Code

34482-8563

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	0	8

Transaction ID: SA11AI.33860

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

155.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Webb M. Garlinghouse

Mailing Address 2320 S Kansas Ave

City

Topeka

State

KS

Zip Code

66611-1142

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LPStuff.com

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.33877

Amount of Each Receipt this Period

200.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Peggy Garner

Mailing Address 218 Diane Dr

City

Madison

State

TN

Zip Code

37115-2564

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33880

Amount of Each Receipt this Period

35.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Peggy Garner

Mailing Address 218 Diane Dr

City

Madison

State

TN

Zip Code

37115-2564

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.33881

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

335.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Robert David Garrard

Mailing Address 2287 N 300th Rd

City

Edgerton

State

KS

Zip Code

66021-4001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Aeroflex Wichita, Inc. /  
JcAIR Test Sy

Occupation  
Technician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33883

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

June R. Genis

Mailing Address 142 Rainbow Dr # 4275

City

Livingston

State

TX

Zip Code

77399-1042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1095.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33926

Amount of Each Receipt this Period

85.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Allyn K. Gerard

Mailing Address PO Box 559

City

Coarsegold

State

CA

Zip Code

93614-0559

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.33929

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

145.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 284

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mark D. Gibb

Mailing Address 2106 Bristol Breeze Ln

City

League City

State

TX

Zip Code

77573-5341

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Naknan, Inc

Occupation

Software Engineer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	0	8

Transaction ID: SA11AI.33946

Amount of Each Receipt this Period

35.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Howard I. Giensoe

Mailing Address 7954 E Obispo Ave

City

Mesa

State

AZ

Zip Code

85212-1527

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Time Machine Stamping

Occupation

Manager

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	0	8

Transaction ID: SA11AI.33948

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Robert Gilliam

Mailing Address PO Box 1167

City

Williamson

State

WV

Zip Code

25661-1167

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	0	8

Transaction ID: SA11AI.33958

Amount of Each Receipt this Period

300.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

585.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Jay Gillotte

Mailing Address 8220 David Hwy

City

Lyons

State

MI

Zip Code

48851-9755

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Presort Services, Inc.

Occupation  
Bus. Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33963

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Jay Gillotte

Mailing Address 8220 David Hwy

City

Lyons

State

MI

Zip Code

48851-9755

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Presort Services, Inc.

Occupation  
Bus. Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.33964

Amount of Each Receipt this Period

200.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

C. Robert Gladstone

Mailing Address 1046 Iroquois Blvd

City

Royal Oak

State

MI

Zip Code

48067-1109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
St Clair Systems, Incl

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.33971

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

330.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Thomas G. Glass

Mailing Address 11510 Summerhill Ln

City

Houston

State

TX

Zip Code

77024-5218

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Exxon USA

Occupation

Systems Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.33972

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Thomas G. Glass

Mailing Address 11510 Summerhill Ln

City

Houston

State

TX

Zip Code

77024-5218

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Exxon USA

Occupation

Systems Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.33973

Amount of Each Receipt this Period

10.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Darrell Goldman

Mailing Address 4725 N County Road 25 W

City

Bainbridge

State

IN

Zip Code

46105-9695

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Quaker Chemical

Occupation

Field Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34008

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

290.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Thadeous A. Goodwyn

Mailing Address 232 N Ridge Dr

City

Bulls Gap

State

TN

Zip Code

37711-4698

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.34029

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Jeffrey Graff

Mailing Address 221 London Downs Dr

City

Forest

State

VA

Zip Code

24551-3023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alliance Industrial Corpo-  
ration

Occupation  
Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.34046

Amount of Each Receipt this Period

1000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Terry Gray

Mailing Address 352 47th Ave SE

City

Salem

State

OR

Zip Code

97317-5579

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.34065

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Gary Greenberg

Mailing Address 355 S End Ave

City

New York

State

NY

Zip Code

10280-1005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Legal Aide Society

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.34070

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Jason Grey

Mailing Address 12940 Coronado Ter

City

North Miami

State

FL

Zip Code

33181-2124

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Grey and Mourin PA

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.34076

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

David Grill

Mailing Address 2702 Willow Bend Rd

City

Champaign

State

IL

Zip Code

61822-7592

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Regency Systems Inc

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.34084

Amount of Each Receipt this Period

250.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 284

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Pete Guard

Mailing Address PO Box 6925

City

Brandon

State

FL

Zip Code

33508-6015

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
American Automobile Assoc-  
iation

Occupation

Computer Programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	0	8

Transaction ID: SA11AI.34114

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Erwin J. Haas

Mailing Address 2456 E Collier Ave SE

City

Grand Rapids

State

MI

Zip Code

49546-6103

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Self Employed

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	0	8

Transaction ID: SA11AI.34144

Amount of Each Receipt this Period

500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Allen Hacker

Mailing Address 6633 Highway 290 East, Suite 111

City

Austin

State

TX

Zip Code

78723-0000

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1120.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	0	8

Transaction ID: SA11AI.34146

Amount of Each Receipt this Period

10.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

560.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

George S. Halepis

Mailing Address 253 Terrace Rd

City

Tarpon Spgs

State

FL

Zip Code

34689-1907

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ramala Express

Occupation  
Security

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.34162

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Henry E. Haller

Mailing Address 6196 Ridge Rd

City

Valencia

State

PA

Zip Code

16059-1734

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Retailer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.76

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.34167

Amount of Each Receipt this Period

17.76

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Lawrence D. Hamilton

Mailing Address 4405 W Antelope Run Ct

City

Castle Rock

State

CO

Zip Code

80109-2862

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Belco Credit Union

Occupation  
Computer Operator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.34176

Amount of Each Receipt this Period

80.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

147.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Lawrence D. Hamilton

Mailing Address 4405 W Antelope Run Ct

City

Castle Rock

State

CO

Zip Code

80109-2862

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Belco Credit Union

Occupation

Computer Operator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.34177

Amount of Each Receipt this Period

99.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Douglas Cecil Hancock

Mailing Address PO Box 543

City

Wayne

State

IL

Zip Code

60184-0543

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.34187

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Edwin R. Haney

Mailing Address 1501 Karin St

City

Ironton

State

OH

Zip Code

45638-1157

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Fiction Author

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.34191

Amount of Each Receipt this Period

25.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

224.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Jerry Harlan

Mailing Address 6424 High Knoll Road

City

San Diego

State

CA

Zip Code

92111-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Thrush Construction, Inc.

Occupation

Construction Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34207

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Wayne E. Harley

Mailing Address 1315 Richmond Dr

City

Melbourne

State

FL

Zip Code

32935-5325

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rockwell Collins Avionics

Occupation

Sr Eng Test Technician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34208

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Ed Harrell

Mailing Address 2600 Juniper Dr

City

Amarillo

State

TX

Zip Code

79109-1946

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.34216

Amount of Each Receipt this Period

500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

630.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Clifford Harrington

Mailing Address 3093 Laramie Rd

City

Riverside

State

CA

Zip Code

92506-3230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.34220

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Jim Harris

Mailing Address PO Box 740

City

E Northport

State

NY

Zip Code

11731-0496

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Harris Precast

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.32

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.34221

Amount of Each Receipt this Period

17.76

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Glenn Hartzheim

Mailing Address 1790 Dry Creek Rd

City

San Jose

State

CA

Zip Code

95124-1211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hartzheim Dodge

Occupation

Auto Dealer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.34244

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

217.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Glenn Hartzheim

Mailing Address 1790 Dry Creek Rd

City

San Jose

State

CA

Zip Code

95124-1211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hartzheim Dodge

Occupation

Auto Dealer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.34245

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Glenn Hartzheim

Mailing Address 1790 Dry Creek Rd

City

San Jose

State

CA

Zip Code

95124-1211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hartzheim Dodge

Occupation

Auto Dealer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.34246

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Bert G. Hassler

Mailing Address 128 Elkins Ave

City

Arcadia

State

CA

Zip Code

91006-1711

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.34251

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 284

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Bert G. Hassler

Mailing Address 128 Elkins Ave

City

Arcadia

State

CA

Zip Code

91006-1711

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	0	8

Transaction ID: SA11AI.34252

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Thomas F. Hastings

Mailing Address 10009 Vista Dr

City

Lenexa

State

KS

Zip Code

66220-2637

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bayer CorporationOccupation  
Veterinary Pathologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	0	8

Transaction ID: SA11AI.34255

Amount of Each Receipt this Period

25.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Gerald Eugene Hatch

Mailing Address 7030 Saulsbury St

City

Arvada

State

CO

Zip Code

80003-3554

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	0	8

Transaction ID: SA11AI.34258

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

150.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Peter A. Hatch

Mailing Address 1578 Carole Way

City

Redwood City

State

CA

Zip Code

94061-2776

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cascal Furn. Inc.

Occupation  
bookkeeper

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.34259

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Ken Heinemann

Mailing Address 3901 S Via Del Ruisenor

City

Green Valley

State

AZ

Zip Code

85614-5017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34312

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

F. E. Heinzelman

Mailing Address 7180 Magruder St

City

La Mesa

State

CA

Zip Code

91942-1415

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34313

Amount of Each Receipt this Period

25.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

375.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Brent M. Heist

Mailing Address 10603 Orinda Dr

City

Cincinnati

State

OH

Zip Code

45249-3534

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Procter & Gamble

Occupation  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34314

Amount of Each Receipt this Period

25.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Charles D. Helton

Mailing Address PO Box 1010

City

Euless

State

TX

Zip Code

76039-1010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.34322

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Ron B. Helwig

Mailing Address PO Box 12

City

Deerfield

State

NH

Zip Code

03037-0012

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Connect Computer

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34325

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

325.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN NATIONAL COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)

James Henke

Mailing Address 920 Thorndale St

City

Indianapolis

State

IN

Zip Code

46214-3705

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.34330

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

David E. Henkle

Mailing Address 1308 E 12th St Apt 2B

City

Mishawaka

State

IN

Zip Code

46544-5734

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34333

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Brad W. Henry

Mailing Address 3606 41st Ave W

City

Seattle

State

WA

Zip Code

98199-1836

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Mindworks, Inc.

Occupation

Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34337

Amount of Each Receipt this Period

10.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

360.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN NATIONAL COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)

Brad W. Henry

Mailing Address 3606 41st Ave W

City

Seattle

State

WA

Zip Code

98199-1836

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Mindworks, Inc.

Occupation

Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.34338

Amount of Each Receipt this Period

25.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

John C. Hermansen

Mailing Address 12012 Robin Dr

City

Catharpin

State

VA

Zip Code

20143-1307

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Language Analysis Systems

Occupation

CEO/Computer Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34350

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Phillip Michael Herrin

Mailing Address 135 Ray Ridge Rd

City

Albany

State

KY

Zip Code

42602-6936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
US Army Corps Of Eng.

Occupation

PowerPlant Operator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.34355

Amount of Each Receipt this Period

25.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

80.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Phillip Michael Herrin

Mailing Address 135 Ray Ridge Rd

City

Albany

State

KY

Zip Code

42602-6936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US Army Corps Of Eng.

Occupation

PowerPlant Operator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.34356

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Regan Philip Hess

Mailing Address 282382 Us Highway 101

City

Port Townsend

State

WA

Zip Code

98368-9396

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.34362

Amount of Each Receipt this Period

25.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Regan Philip Hess

Mailing Address 282382 Us Highway 101

City

Port Townsend

State

WA

Zip Code

98368-9396

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.34363

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

105.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Albert C. Hinkle

Mailing Address 3707 Meridian Ave

City

San Jose

State

CA

Zip Code

95124-3825

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34401

Amount of Each Receipt this Period

20.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Albert C. Hinkle

Mailing Address 3707 Meridian Ave

City

San Jose

State

CA

Zip Code

95124-3825

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.34402

Amount of Each Receipt this Period

20.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Richard T. Hogan

Mailing Address 4425 Shorewood Dr N

City

Hoffman Estates

State

IL

Zip Code

60192-1018

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Zurich North America

Occupation  
Systems Programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.34432

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

90.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN NATIONAL COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)

Susan J. Hogarth

Mailing Address 5901 Penny Rd

City

Raleigh

State

NC

Zip Code

27606-9044

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
University of NC

Occupation

Research Coordinator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34433

Amount of Each Receipt this Period

15.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Douglas Hoiles

Mailing Address 10047 E Acampo Rd

City

Acampo

State

CA

Zip Code

95220-9480

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34434

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Michael Holasek

Mailing Address 1100 W Wells St  
PO Box 05900

City

Milwaukee

State

WI

Zip Code

53205-0900

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Catholic Knights

Occupation

Clerk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34435

Amount of Each Receipt this Period

2750.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

2815.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Charles C. Horton

Mailing Address 9428 Gina Dr

City

West Chester

State

OH

Zip Code

45069-3917

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Federated Department Stor-  
es

Occupation

Credit Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.34476

Amount of Each Receipt this Period

25.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Stephen House

Mailing Address 1053 Harlan Dr

City

San Jose

State

CA

Zip Code

95129-3021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hughes Aircraft Co.

Occupation

Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34482

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Gordon S. Houser

Mailing Address 3851 Essex Pl

City

Bonita Spgs

State

FL

Zip Code

34134-3313

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.34485

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

155.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Ivan Howard

Mailing Address 1303 Cromwell Ct

City

Bel Air

State

MD

Zip Code

21014-2248

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southern States Cooperati-  
ve, Inc.

Occupation

Store Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.34491

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Barbara Howe

Mailing Address 5046 Tar Hill Dr

City

Oxford

State

NC

Zip Code

27565-5416

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34498

Amount of Each Receipt this Period

40.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Lincoln B. Hubbard

Mailing Address 4113 W End Rd

City

Downers Grove

State

IL

Zip Code

60515-2307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hubbard, Broadbent & Asso-  
ciates LTD.

Occupation

Radiological Physicist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.34506

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

390.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Lincoln B. Hubbard

Mailing Address 4113 W End Rd

City

Downers Grove

State

IL

Zip Code

60515-2307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hubbard, Broadbent & Asso-  
ciates LTD.

Occupation

Radiological Physicist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.34507

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

William Y. Humphreys

Mailing Address 404 Spyglass Ln

City

Vero Beach

State

FL

Zip Code

32963-4367

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34538

Amount of Each Receipt this Period

25.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

William Y. Humphreys

Mailing Address 404 Spyglass Ln

City

Vero Beach

State

FL

Zip Code

32963-4367

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.34539

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

225.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Geoffrey H. L. Hunter

Mailing Address 6930 Wildlife Rd

City

Malibu

State

CA

Zip Code

90265-4309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.34544

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Thomas Alexander Hunter

Mailing Address 3465 Meadow Rdg

City

Redding

State

CT

Zip Code

06896-3230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34545

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Thomas Alexander Hunter

Mailing Address 3465 Meadow Rdg

City

Redding

State

CT

Zip Code

06896-3230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

517.76

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.34546

Amount of Each Receipt this Period

17.76

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

167.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Stephen Hutchens

Mailing Address 9914 Travis St

City

Denver

State

CO

Zip Code

80229-2655

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US Postal Service

Occupation  
Mechanic

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34557

Amount of Each Receipt this Period

15.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Peter J. Impala

Mailing Address 29640 Valle Olvera St

City

Temecula

State

CA

Zip Code

92591-1635

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Art Rodriguez & Associates

Occupation  
brokers & consultants

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34567

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Evan D. Isaac

Mailing Address 344 E 62nd St Apt 14

City

New York

State

NY

Zip Code

10065-8280

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
YL Real Estate Developers

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34573

Amount of Each Receipt this Period

85.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

130.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Kim Jackson

Mailing Address 519 Signal Hill Rd

City

North Barrington

State

IL

Zip Code

60010-2031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34579

Amount of Each Receipt this Period

45.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Charles M. Jensen

Mailing Address 2630 Muirfield Dr

City

Westland

State

MI

Zip Code

48186-5491

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ford Motor Company (Retir-  
ed)

Occupation

Retired Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34616

Amount of Each Receipt this Period

40.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Charles M. Jensen

Mailing Address 2630 Muirfield Dr

City

Westland

State

MI

Zip Code

48186-5491

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ford Motor Company (Retir-  
ed)

Occupation

Retired Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34617

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

135.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

David Baird Johnson

Mailing Address 15 Dorchester Ct

City

Hawthorn Woods

State

IL

Zip Code

60047-1615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bain & Company

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34632

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Herbert C. Johnson

Mailing Address 5222 N Stonehouse Pl

City

Tucson

State

AZ

Zip Code

85750-9672

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34635

Amount of Each Receipt this Period

20.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Herbert C. Johnson

Mailing Address 5222 N Stonehouse Pl

City

Tucson

State

AZ

Zip Code

85750-9672

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34636

Amount of Each Receipt this Period

75.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

125.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Paul M. Johnson

Mailing Address 1141 Elkins Dr

City

Auburn

State

AL

Zip Code

36830-6144

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Auburn University

Occupation

College Poli-Sci Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.76

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.34641

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Theodore R. Johnson

Mailing Address PO Box 670

City

Freeland

State

WA

Zip Code

98249-0670

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34645

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Clint Jones

Mailing Address 2241 S Lowell Blvd

City

Denver

State

CO

Zip Code

80219-5306

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Down to Earth Inc

Occupation

Owner/Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34663

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

180.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 92 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

James H. Jones

Mailing Address 22491 De Berry St  
Apt 117

City State Zip Code  
Grand Terrace CA 92313-5454

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Optivus Technologies

Occupation  
Verification Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.34666

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

John Brady Jones

Mailing Address 402 Massie St

City State Zip Code  
Atlanta TX 75551-2332

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Ward Timber Co., Inc.

Occupation  
Forester

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34669

Amount of Each Receipt this Period

60.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Stan R. Jones

Mailing Address PO Box 6202

City State Zip Code  
Bozeman MT 59771-6202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Retired Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34679

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

190.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 93 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Glenn Josefiak

Mailing Address 500B Monroe Tpke # 130

City

Monroe

State

CT

Zip Code

06468-2340

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.34688

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Jon Kalb

Mailing Address 5286 Crestline Way

City

Pleasanton

State

CA

Zip Code

94566-5470

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Microsoft

Occupation

Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34706

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Albert Kandrot

Mailing Address 360 Old Zoar Rd

City

Monroe

State

CT

Zip Code

06468-1434

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Illuminating

Occupation

Lineman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.34711

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

180.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 94 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Jeffrey Marcus Kanter

Mailing Address 30999 Gates Mills Blvd

City

Cleveland

State

OH

Zip Code

44124-4358

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Republic Insuran-  
ce Company

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.34714

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Daniel M. Karlan

Mailing Address 97 Manhattan Ave

City

Waldwick

State

NJ

Zip Code

07463-2228

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self employed

Occupation  
Author

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.34723

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Edward W. Karpinski

Mailing Address 3457 Iroquois St

City

Detroit

State

MI

Zip Code

48214-1839

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34728

Amount of Each Receipt this Period

15.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

215.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Edward W. Karpinski

Mailing Address 3457 Iroquois St

City

Detroit

State

MI

Zip Code

48214-1839

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.34729

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Edward W. Karpinski

Mailing Address 3457 Iroquois St

City

Detroit

State

MI

Zip Code

48214-1839

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

705.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.34730

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Leonard Karpinski

Mailing Address 2285 SW Creekside Ln

City

McMinnville

State

OR

Zip Code

97128-8948

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nana/Test, Anchorage

Occupation  
Elec/Instr Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34731

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

230.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Leonard Karpinski

Mailing Address 2285 SW Creekside Ln

City

McMinnville

State

OR

Zip Code

97128-8948

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nana/Test, Anchorage

Occupation

Elec/Instr Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.34732

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Dave Kaufman

Mailing Address 310 W Wayne Pl

City

Wheeling

State

IL

Zip Code

60090-4637

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Howard Simon & Associates,  
Inc

Occupation

Retirement Plan Administr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34741

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

John Kayser

Mailing Address 225 E 1st St

City

Hinsdale

State

IL

Zip Code

60521-4228

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.34748

Amount of Each Receipt this Period

250.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 97 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Jeremy Keil

Mailing Address 3808 S 102nd St

City

Milwaukee

State

WI

Zip Code

53228-1328

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Thrivent Financial

Occupation

Financial Associate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34757

Amount of Each Receipt this Period

10.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Gustave Kein

Mailing Address 1800 N Andrews Ave Apt 8D

City

Fort Lauderdale

State

FL

Zip Code

33311-3904

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kein Holdings, LLC

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.37941

Amount of Each Receipt this Period

250.00

Treasurer's Best Efforts  
(See Memo)

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)

Gustave Kein

Mailing Address 1800 N Andrews Ave Apt 8D

City

Fort Lauderdale

State

FL

Zip Code

33311-3904

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kein Holdings, LLC

Occupation

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.76

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.34758

Amount of Each Receipt this Period

17.76

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

27.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 98 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Douglas C. Keith

Mailing Address 1448 Turner Farms Rd

City

Garner

State

NC

Zip Code

27529-7413

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.34760

Amount of Each Receipt this Period

25.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Douglas C. Keith

Mailing Address 1448 Turner Farms Rd

City

Garner

State

NC

Zip Code

27529-7413

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.34761

Amount of Each Receipt this Period

25.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Douglas C. Keith

Mailing Address 1448 Turner Farms Rd

City

Garner

State

NC

Zip Code

27529-7413

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.34762

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 99 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Martin Joseph Keller

Mailing Address 2374 Monument Rd

City

Jasper

State

GA

Zip Code

30143-2483

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.34766

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

John David Kelley

Mailing Address 1410 W Milledgeville Ave

City

Lebanon

State

IN

Zip Code

46052-9717

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.34770

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Brendan Kelly

Mailing Address 17 Ayer Cir

City

Seabrook

State

NH

Zip Code

03874-4002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Wrecker Svcs

Occupation  
Dispatcher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34774

Amount of Each Receipt this Period

25.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

175.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 100 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN NATIONAL COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)

Rebecca Kelly

Mailing Address 700 Greystone Park NE

City

Atlanta

State

GA

Zip Code

30324-5297

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Southern Tech

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34782

Amount of Each Receipt this Period

85.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Richard S. Kerr

Mailing Address 483 Rebecca St

City

Morgantown

State

WV

Zip Code

26505-2246

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.34790

Amount of Each Receipt this Period

35.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Brian Kiernan

Mailing Address 435 Carpenters Cove Ln

City

Downingtown

State

PA

Zip Code

19335-4541

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Interdigital Comm Corp

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34808

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

170.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 101 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

John E. Kite

Mailing Address 1105 Sunset Dr

City

Somerdale

State

NJ

Zip Code

08083-1925

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34845

Amount of Each Receipt this Period

15.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Larry Klaas

Mailing Address 86 Foothill Blvd

City

Rock Springs

State

WY

Zip Code

82901-5551

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Winchester Management, In-  
c.

Occupation  
Investor/Bus. Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.34849

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Edward Klapproth

Mailing Address 1021 Prestwick St

City

Las Vegas

State

NV

Zip Code

89145-8520

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CCSN

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34853

Amount of Each Receipt this Period

85.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 102 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

David F. Klein

Mailing Address 254 Township Line Rd

City

Port Angeles

State

WA

Zip Code

98362-7433

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34855

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Emil Alfred Kleiner

Mailing Address 45 Springfield Dr

City

North East

State

MD

Zip Code

21901-1332

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Adecco Technical

Occupation

Sr. Project Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.34856

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

John A. Kleiner

Mailing Address 46 Greenfield Dr

City

Moraga

State

CA

Zip Code

94556-1333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.37947

Amount of Each Receipt this Period

480.00

Treasurer's Best Efforts  
(See Memo)

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional) .....

200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 103 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

John A. Kleiner

Mailing Address 46 Greenfield Dr

City

Moraga

State

CA

Zip Code

94556-1333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37944

Amount of Each Receipt this Period

35.00

Treasurer's Best Efforts  
(See Memo)

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

John A. Kleiner

Mailing Address 46 Greenfield Dr

City

Moraga

State

CA

Zip Code

94556-1333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37948

Amount of Each Receipt this Period

35.00

Treasurer's Best Efforts  
(See Memo)

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

John A. Kleiner

Mailing Address 46 Greenfield Dr

City

Moraga

State

CA

Zip Code

94556-1333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34857

Amount of Each Receipt this Period

35.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

35.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 104 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Bernadette Klink

Mailing Address 4833 Fountain Ave

City

Los Angeles

State

CA

Zip Code

90029-1603

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Church of Scientology

Occupation

Computer Systems Tester

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.34865

Amount of Each Receipt this Period

25.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Bernadette Klink

Mailing Address 4833 Fountain Ave

City

Los Angeles

State

CA

Zip Code

90029-1603

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Church of Scientology

Occupation

Computer Systems Tester

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.34866

Amount of Each Receipt this Period

25.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Johnny Klonaris

Mailing Address 2151 Oakland Rd Spc 371

City

San Jose

State

CA

Zip Code

95131-1539

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34867

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 105 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN NATIONAL COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)

Kevin Knedler

Mailing Address 6248 Home Rd

City

Delaware

State

OH

Zip Code

43015-9238

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Scotts Company

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.34871

Amount of Each Receipt this Period

80.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Anthony P. Kochenash

Mailing Address 2831 Osborne Rd

City

Cameron Park

State

CA

Zip Code

95682-9048

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
TWA

Occupation

Airline Pilot

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.34879

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Kevin Kokernak

Mailing Address 3322 23rd Ave

City

Astoria

State

NY

Zip Code

11105-2203

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Schonfeld Securities

Occupation

Trade Support Clerk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.34882

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

280.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 106 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Richard Konjarevich

Mailing Address 6095 Trophy Ave

City

Howell

State

MI

Zip Code

48855-8275

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GM

Occupation  
Worker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34884

Amount of Each Receipt this Period

35.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Bob L. Krel

Mailing Address 5001 Silver Sands Ave

City

El Paso

State

TX

Zip Code

79924-1127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.34912

Amount of Each Receipt this Period

2000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Jon Michael Kueny

Mailing Address 4919 Dory Dr

City

New Port Richey

State

FL

Zip Code

34652-4410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34921

Amount of Each Receipt this Period

20.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

2055.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 107 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

John R. Kuhn

Mailing Address 42 Church St

City

Charleston

State

SC

Zip Code

29401-2742

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cothran Law Office LLC

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1335.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34922

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Rebecca A. Kurk

Mailing Address 6429 City West Pkwy  
Apt 4306

City

Eden Prairie

State

MN

Zip Code

55344-3282

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34933

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Steven M. Kymes

Mailing Address 6821 Wanda Ave

City

Saint Louis

State

MO

Zip Code

63116-2122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Washington University

Occupation  
Researcher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34937

Amount of Each Receipt this Period

35.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

95.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 108 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Harold Kyriazi

Mailing Address 4245 Bryn Mawr Rd

City

Pittsburgh

State

PA

Zip Code

15219-5726

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.Pitts.Med.School

Occupation

Research Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34938

Amount of Each Receipt this Period

15.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Bruce K. Lagasse

Mailing Address 1029 Ringneck Way

City

Sparks

State

NV

Zip Code

89441-7815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34958

Amount of Each Receipt this Period

40.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Bruce K. Lagasse

Mailing Address 1029 Ringneck Way

City

Sparks

State

NV

Zip Code

89441-7815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.34959

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

105.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 109 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Ben Lake

Mailing Address 7601 Churchill Way Apt 1729

City

Dallas

State

TX

Zip Code

75251-1946

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wieck Media

Occupation

Web Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34965

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

George Peter Lamb

Mailing Address 137 Orchard Oak Cir

City

Campbell

State

CA

Zip Code

95008-2133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Network Design Communicat-  
ions

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34969

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Bruce A. Landers

Mailing Address 20 Saint Andrews Dr SE

City

Cartersville

State

GA

Zip Code

30120-6926

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.34973

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

160.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 110 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Marcy Sue Larson

Mailing Address 2215 Cascade Lakes Cir SE

City

Grand Rapids

State

MI

Zip Code

49546-6623

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Forest Hills Pediatrics

Occupation

Pediatrician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35003

Amount of Each Receipt this Period

10.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Marcy Sue Larson

Mailing Address 2215 Cascade Lakes Cir SE

City

Grand Rapids

State

MI

Zip Code

49546-6623

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Forest Hills Pediatrics

Occupation

Pediatrician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.35004

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

James Robert Latham

Mailing Address 845 S Main St Ste 23

City

Bountiful

State

UT

Zip Code

84010-6381

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Independent Institute

Occupation

Public Affairs Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35008

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

110.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 111 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Andrew LeCureax

Mailing Address 23440 Tawas Ave

City

Hazel Park

State

MI

Zip Code

48030-2739

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Appliance Installer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35029

Amount of Each Receipt this Period

25.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Myron Ledworowski

Mailing Address 7730 Hillcrest Ave

City

Middleton

State

WI

Zip Code

53562-3616

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self (Lil America Building  
Inc

Occupation

Remodeling Contractor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.35031

Amount of Each Receipt this Period

25.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Jonathan Lee

Mailing Address 1103 Saint John Ave

City

Dyersburg

State

TN

Zip Code

38024-3370

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nucor Steel-AR

Occupation

Electrician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35036

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 112 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Thomas M. Lemberg

Mailing Address 600 McKenzie Cir

City

Stockbridge

State

GA

Zip Code

30281-2896

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Draftsman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.35051

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Robert Lempke

Mailing Address 4732 Taft Rd

City

West Lafayette

State

IN

Zip Code

47906-5637

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lafayette Anesthesiologis-  
t, LLC

Occupation  
Anesthesiologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35052

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Robert C. Lewis

Mailing Address PO Box 5183

City

New Britain

State

PA

Zip Code

18901-0936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.35086

Amount of Each Receipt this Period

150.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

280.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 113 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Robert C. Lewis

Mailing Address PO Box 5183

City

New Britain

State

PA

Zip Code

18901-0936

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.35087

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Kenneth Lidonnici

Mailing Address 433 E 56th St

City

New York

State

NY

Zip Code

10022-2432

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
General A.V. Inc.

Occupation

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35091

Amount of Each Receipt this Period

10.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Scott Lieberman

Mailing Address 15466 Los Gatos Blvd Ste 109-280

City

Los Gatos

State

CA

Zip Code

95032-2542

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.35095

Amount of Each Receipt this Period

300.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

410.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 114 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Harold G. Lippert

Mailing Address PO Box 965

City

Fort Benton

State

MT

Zip Code

59442-0965

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35117

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Harold G. Lippert

Mailing Address PO Box 965

City

Fort Benton

State

MT

Zip Code

59442-0965

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.35118

Amount of Each Receipt this Period

1000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Harold G. Lippert

Mailing Address PO Box 965

City

Fort Benton

State

MT

Zip Code

59442-0965

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.35119

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 115 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Southard Lippincott

Mailing Address 74 Tyler Ter

City

Newton Center

State

MA

Zip Code

02459-1814

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35120

Amount of Each Receipt this Period

25.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Paul F. List

Mailing Address PO Box 64

City

Newberry

State

MI

Zip Code

49868-0064

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.35122

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Kenneth L. Locher

Mailing Address 141 Lois Ln

City

Vallejo

State

CA

Zip Code

94590-3556

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KL Locher Inc.

Occupation  
Retail Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.35132

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

225.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 116 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Kenneth L. Locher

Mailing Address 141 Lois Ln

City

Vallejo

State

CA

Zip Code

94590-3556

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KL Locher Inc.

Occupation

Retail Management

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.35133

Amount of Each Receipt this Period

60.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Raymond C. Loughlin

Mailing Address 6 Wilkens Dr  
Ste 207

City

Plainville

State

MA

Zip Code

02762-5019

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alliance Electric, Inc.

Occupation

Contractor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.35153

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

John Low

Mailing Address 111 N Rengstorff Ave

City

Mountain View

State

CA

Zip Code

94043-4208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fed.Express

Occupation

mail handler

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.35156

Amount of Each Receipt this Period

250.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

360.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 117 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Walter Luers

Mailing Address 48 Carlisle Ct

City

Old Bridge

State

NJ

Zip Code

08857-2796

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Patterson Belknap Webb Ty-  
ler

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35175

Amount of Each Receipt this Period

10.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Brian Kenneth Luke

Mailing Address 1431 Washington Blvd Apt 904

City

Detroit

State

MI

Zip Code

48226-1721

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Daimler Chrysler

Occupation  
Tooling Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35176

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Vaughan T. Lund

Mailing Address 1503 Brook Valley Ln NE

City

Atlanta

State

GA

Zip Code

30324-3212

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cooperative Technologies

Occupation  
Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35177

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

90.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 118 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN NATIONAL COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)

Vaughan T. Lund

Mailing Address 1503 Brook Valley Ln NE

City

Atlanta

State

GA

Zip Code

30324-3212

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Cooperative Technologies

Occupation  
Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.35178

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Vaughan T. Lund

Mailing Address 1503 Brook Valley Ln NE

City

Atlanta

State

GA

Zip Code

30324-3212

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Cooperative Technologies

Occupation  
Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.35179

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Kevin J. Lynch

Mailing Address PO Box 711

City

Algona

State

IA

Zip Code

50511-0711

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35192

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 119 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Matthew Lyons

Mailing Address 8405 Villaverde Dr

City

Whittier

State

CA

Zip Code

90605-1341

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Capital Group

Occupation

Global Trading Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.35194

Amount of Each Receipt this Period

2500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Matthew Lyons

Mailing Address 8405 Villaverde Dr

City

Whittier

State

CA

Zip Code

90605-1341

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Capital Group

Occupation

Global Trading Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.35195

Amount of Each Receipt this Period

2500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Ronald MacArtney

Mailing Address 739 Franklin St

City

Hinsdale

State

IL

Zip Code

60521-3614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.35197

Amount of Each Receipt this Period

35.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

5035.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 120 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Hardy A. Macia

Mailing Address 120 Canterbury Shore Dr

City

Canterbury

State

NH

Zip Code

03224-2702

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Software Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6087.77

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.35200

Amount of Each Receipt this Period

17.76

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Hardy A. Macia

Mailing Address 120 Canterbury Shore Dr

City

Canterbury

State

NH

Zip Code

03224-2702

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Software Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6167.77

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.35201

Amount of Each Receipt this Period

80.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

David Macko

Mailing Address 28810 Cannon Rd

City

Solon

State

OH

Zip Code

44139-1556

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.35207

Amount of Each Receipt this Period

10.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

107.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 121 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Roland W. Maddrey

Mailing Address 732 N Main St

City

Mooreville

State

NC

Zip Code

28115-2314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35210

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

David Thomas Manley

Mailing Address 2485 Bethany Ln

City

Hinckley

State

OH

Zip Code

44233-9741

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Variable Protection Admin.

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.35242

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

David R. Mason

Mailing Address 2234 E Crosby Rd

City

Carrollton

State

TX

Zip Code

75006-7744

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Verizon Wireless

Occupation

Telecom Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35273

Amount of Each Receipt this Period

200.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

David R. Mason

Mailing Address 2234 E Crosby Rd

City

Carrollton

State

TX

Zip Code

75006-7744

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Verizon Wireless

Occupation

Telecom Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.35274

Amount of Each Receipt this Period

1000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Thomas P. Mathers

Mailing Address 5626 Ruatan St

City

Berwyn Heights

State

MD

Zip Code

20740-4312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NCBFAA Inc.

Occupation

Dircomm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35287

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Quincy Matthews

Mailing Address 2336 Martin Ave

City

Baton Rouge

State

LA

Zip Code

70802-1430

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SNBC

Occupation

Transportation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35297

Amount of Each Receipt this Period

25.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1075.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 123 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Alicia Mattson

Mailing Address 978 River Bend Dr

City

Cookeville

State

TN

Zip Code

38506-5972

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cardinal Computer Corp.

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35300

Amount of Each Receipt this Period

20.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Nathan Maxfield

Mailing Address US NCE

City

APO AE

State

ZZ

Zip Code

09355-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. Army

Occupation  
Public Affairs Supervisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.37532

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Carol May

Mailing Address 5823 Eldorado PI NW

City

Bremerton

State

WA

Zip Code

98312-1171

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.76

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.35301

Amount of Each Receipt this Period

17.76

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

287.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 124 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Carol May

Mailing Address 5823 Eldorado Pl NW

City

Bremerton

State

WA

Zip Code

98312-1171

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.76

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.35302

Amount of Each Receipt this Period

25.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Douglas B. Mayhew

Mailing Address 8840 E Calle Bolivar

City

Tucson

State

AZ

Zip Code

85715-5620

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Raytheon

Occupation

Electronics Technician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35306

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Lewis McCarthy

Mailing Address 4750 Torrey Pines Cir

City

San Jose

State

CA

Zip Code

95124-4417

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
XETI

Occupation

Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35325

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

85.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 125 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Michael J. McClung

Mailing Address PO Box 463

City

Blackwell

State

OK

Zip Code

74631-0463

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Werner Enterprises

Occupation

Truck Driver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.35332

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Michael J. McClung

Mailing Address PO Box 463

City

Blackwell

State

OK

Zip Code

74631-0463

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Werner Enterprises

Occupation

Truck Driver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.35333

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Michael J. McClung

Mailing Address PO Box 463

City

Blackwell

State

OK

Zip Code

74631-0463

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Werner Enterprises

Occupation

Truck Driver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.35334

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 126 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Michael J. McClung

Mailing Address PO Box 463

City

Blackwell

State

OK

Zip Code

74631-0463

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Werner Enterprises

Occupation

Truck Driver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.35335

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Donald L. McDaniel

Mailing Address PO Box 1111

City

Astoria

State

OR

Zip Code

97103-1111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.35354

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Douglas R. McKissack

Mailing Address 7 Bitterroot Ln

City

Savannah

State

GA

Zip Code

31419-9507

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gulfstream Aerospace

Occupation

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35399

Amount of Each Receipt this Period

250.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Douglas R. McKissack

Mailing Address 7 Bitterroot Ln

City

Savannah

State

GA

Zip Code

31419-9507

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gulfstream Aerospace

Occupation  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.35400

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Michael S. McLane

Mailing Address 215 Hancock Ln

City

Athens

State

GA

Zip Code

30605-4741

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35401

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Gregory A. Meckling

Mailing Address 19115 14th Ct NW

City

Shoreline

State

WA

Zip Code

98177-2756

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Turner Construction

Occupation  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35427

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

130.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 128 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Ray Melissa

Mailing Address 28066 Tefir

City

Mission Viejo

State

CA

Zip Code

92692-1300

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Melissa Data Corporation

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.35442

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Allen R Merriman

Mailing Address 3304 N Vernon St

City

Arlington

State

VA

Zip Code

22207-4468

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35454

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Carl Minie

Mailing Address 115 G St

City

Salt Lake City

State

UT

Zip Code

84103-2954

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gold Systems

Occupation  
Software Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.35525

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

380.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 129 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Yehia Mishriki

Mailing Address 4752 Belmont Dr

City

Emmaus

State

PA

Zip Code

18049-1227

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lehigh Valley Hospital

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35533

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Louis Misko

Mailing Address 4317 Argos Dr

City

San Diego

State

CA

Zip Code

92116-2329

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US Navy

Occupation  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35534

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Dawn R. Moore

Mailing Address 3426 161st PI SE

City

Bellevue

State

WA

Zip Code

98008-4539

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Microsoft

Occupation  
IT Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35563

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

160.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 130 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Lanora Moore

Mailing Address 6207 Glenwood Ave

City

State

Zip Code

Mission

KS

66202-3214

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retired

Occupation  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35566

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Melinda Moore

Mailing Address 827 Anthony Ct SE

City

State

Zip Code

Leesburg

VA

20175-5629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Catholic University of America

Occupation  
Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.20748

Amount of Each Receipt this Period

500.00

Contribution

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)

Melinda Moore

Mailing Address 827 Anthony Ct SE

City

State

Zip Code

Leesburg

VA

20175-5629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Catholic University of America

Occupation  
Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.37896

Amount of Each Receipt this Period

-475.00

Redesignate: Contribution  
(See Memo)

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional) .....

50.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 131 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Melinda Moore

Mailing Address 827 Anthony Ct SE

City

Leesburg

State

VA

Zip Code

20175-5629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Catholic University of Am-  
erica

Occupation  
Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.20749

Amount of Each Receipt this Period

560.00

Contribution

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)

Melinda Moore

Mailing Address 827 Anthony Ct SE

City

Leesburg

State

VA

Zip Code

20175-5629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Catholic University of Am-  
erica

Occupation  
Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5275.02

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.37899

Amount of Each Receipt this Period

-560.00

Reattribute: Contribution  
(See Memo)

**C.**

Full Name (Last, First, Middle Initial)

Melinda Moore

Mailing Address 827 Anthony Ct SE

City

Leesburg

State

VA

Zip Code

20175-5629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Catholic University of Am-  
erica

Occupation  
Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.20750

Amount of Each Receipt this Period

83.34

Contribution

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional) .....

-560.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 132 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Melinda Moore

Mailing Address 827 Anthony Ct SE

City

Leesburg

State

VA

Zip Code

20175-5629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Catholic University of Am-  
erica

Occupation  
Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5191.68

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.37902

Amount of Each Receipt this Period

-83.34

Reattribute: Contribution  
(See Memo)

**B.**

Full Name (Last, First, Middle Initial)

Melinda Moore

Mailing Address 827 Anthony Ct SE

City

Leesburg

State

VA

Zip Code

20175-5629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Catholic University of Am-  
erica

Occupation  
Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.25149

Amount of Each Receipt this Period

83.34

Contribution

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)

Melinda Moore

Mailing Address 827 Anthony Ct SE

City

Leesburg

State

VA

Zip Code

20175-5629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Catholic University of Am-  
erica

Occupation  
Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5108.34

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.37910

Amount of Each Receipt this Period

-83.34

Reattribute: Contribution  
(See Memo)

**SUBTOTAL** of Receipts This Page (optional) .....

-166.68

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 133 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Melinda Moore

Mailing Address 827 Anthony Ct SE

City

Leesburg

State

VA

Zip Code

20175-5629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Catholic University of Am-  
erica

Occupation  
Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.25150

Amount of Each Receipt this Period

5000.00

Contribution

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)

Melinda Moore

Mailing Address 827 Anthony Ct SE

City

Leesburg

State

VA

Zip Code

20175-5629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Catholic University of Am-  
erica

Occupation  
Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

108.34

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.37913

Amount of Each Receipt this Period

-5000.00

Reattribute: Contribution  
(See Memo)

**C.**

Full Name (Last, First, Middle Initial)

Melinda Moore

Mailing Address 827 Anthony Ct SE

City

Leesburg

State

VA

Zip Code

20175-5629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Catholic University of Am-  
erica

Occupation  
Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.30143

Amount of Each Receipt this Period

83.34

Contribution

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional) .....

-5000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 134 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN NATIONAL COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)

Melinda Moore

Mailing Address 827 Anthony Ct SE

City

Leesburg

State

VA

Zip Code

20175-5629

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Catholic University of Am-  
erica

Occupation  
Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.37916

Amount of Each Receipt this Period

-83.34

Reattribute: Contribution  
(See Memo)

**B.**

Full Name (Last, First, Middle Initial)

Robert Moore

Mailing Address 398 Plains Rd

City

Lisbon

State

NH

Zip Code

03585-6923

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Solid Earth, Inc.

Occupation  
Geographer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35572

Amount of Each Receipt this Period

47.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Ronald G. Moore

Mailing Address 208 E 13th St Apt 3F

City

New York

State

NY

Zip Code

10003-5604

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Marketing Technologies Gr-  
oup

Occupation  
Computer Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35573

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

-6.34

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 135 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Ronald G. Moore

Mailing Address 208 E 13th St Apt 3F

City

New York

State

NY

Zip Code

10003-5604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Marketing Technologies Gr-  
oup

Occupation

Computer Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.35574

Amount of Each Receipt this Period

500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Ronald G. Moore

Mailing Address 208 E 13th St Apt 3F

City

New York

State

NY

Zip Code

10003-5604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Marketing Technologies Gr-  
oup

Occupation

Computer Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1460.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.35575

Amount of Each Receipt this Period

500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

David C. Morris

Mailing Address 657 Carriage Lake Dr

City

Lexington

State

SC

Zip Code

29072-7515

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UCL Medical Assoc.

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.35589

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 136 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

William E. Morris

Mailing Address 2124 Brandywood Dr

City

Wilmington

State

DE

Zip Code

19810-2435

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35596

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Chuck Moulton

Mailing Address 1036 Hemlock Dr

City

Blue Bell

State

PA

Zip Code

19422-1572

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Villanova Law School

Occupation

Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35605

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

George W. Mowbray

Mailing Address 3649 Burton Ln

City

Lake Charles

State

LA

Zip Code

70605-1025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lake Charles Pilots, Inc.

Occupation

River Pilot

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35606

Amount of Each Receipt this Period

150.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

280.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 137 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN NATIONAL COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)

Barry J. Musser

Mailing Address PO Box 370

City

Goshen

State

CA

Zip Code

93227-0370

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.35627

Amount of Each Receipt this Period

200.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Cynthia L. Myers

Mailing Address 111 Elmwood Ave

City

Narberth

State

PA

Zip Code

19072-2409

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Paul, Reich & Myers, P.C.

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35632

Amount of Each Receipt this Period

200.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Ed Nagel

Mailing Address PO Box 2823

City

Santa Fe

State

NM

Zip Code

87504-2823

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Santa Fe Community School

Occupation  
Educator, Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.35637

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 138 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Ed Nagel

Mailing Address PO Box 2823

City

Santa Fe

State

NM

Zip Code

87504-2823

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Santa Fe Community School

Occupation

Educator, Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.35638

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Kathleen Neff

Mailing Address 5725 SW 13th St

City

Topeka

State

KS

Zip Code

66604-2226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Business Owner, Self-Employed

Occupation

Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.35662

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Donald J. Nelson

Mailing Address 4970 SE Tacoma St

City

Prineville

State

OR

Zip Code

97754-8579

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35670

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 139 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

W. John Nelson

Mailing Address PO Box 109

City

Pesotum

State

IL

Zip Code

61863-0109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Illinois State Geological  
Sur.

Occupation  
Geologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.35679

Amount of Each Receipt this Period

150.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

John L. Nemeth

Mailing Address 7924 W Juniper Shadows Way

City

Tucson

State

AZ

Zip Code

85743-5462

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35680

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Byron K. Nichols

Mailing Address 9000 Holly Street

City

Kansas City

State

MO

Zip Code

64114-3528

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US Gov't

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35692

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

230.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 140 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN NATIONAL COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)

Gerald K. Nifontoff

Mailing Address 1777 Puterbaugh St

City

San Diego

State

CA

Zip Code

92103-2713

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.35701

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Henry O'Connor

Mailing Address 1319 Windham Rd

City

Columbus

State

OH

Zip Code

43220-3962

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Freedom Transport, Inc.

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.35737

Amount of Each Receipt this Period

500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Stan L. O'Dell

Mailing Address 775 Shady Oaks Cir

City

Oxford

State

MS

Zip Code

38655-5450

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35740

Amount of Each Receipt this Period

25.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

555.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 141 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Stan L. O'Dell

Mailing Address 775 Shady Oaks Cir

City

Oxford

State

MS

Zip Code

38655-5450

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.35741

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Barnaby Ohrstrom

Mailing Address 4811 Sweetmeadow Cir

City

Sarasota

State

FL

Zip Code

34238-3320

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.35756

Amount of Each Receipt this Period

1000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Bill Olinger

Mailing Address 18 Imperial PI Unit 5G

City

Providence

State

RI

Zip Code

02903-4643

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35765

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 142 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Wilfred W. Olschewski

Mailing Address 411 Walnut St # 1844

City

Green Cove Springs

State

FL

Zip Code

32043-3443

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Retired CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.35772

Amount of Each Receipt this Period

2500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Norman L. Onstad

Mailing Address PO Box 9

City

New London

State

MN

Zip Code

56273-0009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.35787

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Norman L. Onstad

Mailing Address PO Box 9

City

New London

State

MN

Zip Code

56273-0009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.35788

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

2700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 143 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Steven R. Osborne

Mailing Address 412 River Oaks Dr

City  
Luling

State  
LA

Zip Code  
70070-2144

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Dow Chemical Company

Occupation  
Chemical Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35799

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Michael Panella

Mailing Address 264 Willowbrook Dr

City

North Brunswick

State

NJ

Zip Code

08902-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Stationers

Occupation  
Warehouse Selector

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35824

Amount of Each Receipt this Period

25.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Sumner Parker

Mailing Address 7762 Bloomfield Rd

City

Easton

State

MD

Zip Code

21601-7508

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35846

Amount of Each Receipt this Period

250.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

325.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 144 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Thomas W. Parks

Mailing Address 17009 Crothers Rd

City

San Jose

State

CA

Zip Code

95127-1745

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.35848

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Richard Lyman Partridge

Mailing Address 4480 N. Highway 38

City

Brigham City

State

UT

Zip Code

84301-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US Navy

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.76

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.35855

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Richard B. Patterson

Mailing Address 1790 Allenby Grn

City

Germantown

State

TN

Zip Code

38139-3238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sunwest Management, Inc.

Occupation

Community Relations Coordinator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.35869

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 145 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Richard Patton

Mailing Address 16387 80th St S

City

Hastings

State

MN

Zip Code

55033-9410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.35870

Amount of Each Receipt this Period

1000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Joshua Paulson

Mailing Address 67 Ridge Rd

City

Upton

State

MA

Zip Code

01568-1029

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cisco Systems

Occupation

Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.35872

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Arjen Peirce

Mailing Address 3001 Coleridge Rd

City

Cleveland

State

OH

Zip Code

44118-3526

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Calix

Occupation

Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35889

Amount of Each Receipt this Period

35.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1285.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 146 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN NATIONAL COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)  
 Robert Pendergrass

Mailing Address 351 Huskey Dr

City State Zip Code  
 Seymour TN 37865-4513

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 University of Tennessee

Occupation  
 Economist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35899

Amount of Each Receipt this Period

35.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
 Hugh Perrine

Mailing Address 36423 Camp Creek Rd

City State Zip Code  
 Springfield OR 97478-8757

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Self-Employed

Occupation  
 Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.35915

Amount of Each Receipt this Period

1000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
 Timothy O. Peters

Mailing Address 3100 Jennings Rd

City State Zip Code  
 Kensington MD 20895-2711

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Viedo France Yamazaki Inc.

Occupation  
 Computer Programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35920

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1065.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 147 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Carol Piwowar

Mailing Address 7121 Lonzo St

City

Tujunga

State

CA

Zip Code

91042-1461

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35984

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Frances R. Planner

Mailing Address 103 Homestead Vlg Apt 3

City

Fairhope

State

AL

Zip Code

36532-2971

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.35986

Amount of Each Receipt this Period

1000.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Michele R. Poague

Mailing Address 21079 E Mineral Dr

City

Aurora

State

CO

Zip Code

80016-1927

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bavaria Inn

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.35987

Amount of Each Receipt this Period

75.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1105.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 148 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Robert Pollard

Mailing Address 11150 S 1501 Rd

City

Stockton

State

MO

Zip Code

65785-9164

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.36001

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Pamela P. Potter

Mailing Address 538 Spring Place Rd NE

City

White

State

GA

Zip Code

30184-2232

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36012

Amount of Each Receipt this Period

500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Earl Prochaska

Mailing Address 8 Laurretta Dr

City

Highland

State

NY

Zip Code

12528-1006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.36038

Amount of Each Receipt this Period

60.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

660.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 149 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN NATIONAL COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)

Earl Prochaska

Mailing Address 8 Lauretta Dr

City

Highland

State

NY

Zip Code

12528-1006

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.36039

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Saul Rackauskas

Mailing Address 7604 E Autumn Leaf Dr

City

Tucson

State

AZ

Zip Code

85706-6130

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Mission Linen Supply

Occupation  
Environmental Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.36078

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Nick Rajnovic

Mailing Address 8976 33rd Ave

City

Kenosha

State

WI

Zip Code

53142-5410

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Detrol Controls

Occupation  
Electrical Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36083

Amount of Each Receipt this Period

60.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

190.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 150 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Joseph Rastelli

Mailing Address 826 Humboldt St

City

Reno

State

NV

Zip Code

89509-2008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.36094

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Thomas Ratts

Mailing Address 125 56th Ave S Apt 148

City

Saint Petersburg

State

FL

Zip Code

33705-5462

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36095

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

William B. Redpath

Mailing Address 827 Anthony Ct SE

City

Leesburg

State

VA

Zip Code

20175-5629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BIA Financial Network, In-  
c.

Occupation  
Financial Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.36

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.37931

Amount of Each Receipt this Period

83.34

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

433.34

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 151 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

William B. Redpath

Mailing Address 827 Anthony Ct SE

City

Leesburg

State

VA

Zip Code

20175-5629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BIA Financial Network, In-  
c.

Occupation

Financial Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.37897

Amount of Each Receipt this Period

475.00

Redesignate: (See Memo)

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

William B. Redpath

Mailing Address 827 Anthony Ct SE

City

Leesburg

State

VA

Zip Code

20175-5629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BIA Financial Network, In-  
c.

Occupation

Financial Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1393.36

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.37900

Amount of Each Receipt this Period

560.00

Reattribute: (See Memo)

**C.**

Full Name (Last, First, Middle Initial)

William B. Redpath

Mailing Address 827 Anthony Ct SE

City

Leesburg

State

VA

Zip Code

20175-5629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BIA Financial Network, In-  
c.

Occupation

Financial Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1476.70

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.37903

Amount of Each Receipt this Period

83.34

Reattribute:(See Memo)

**SUBTOTAL** of Receipts This Page (optional) .....

643.34

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 152 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

William B. Redpath

Mailing Address 827 Anthony Ct SE

City

Leesburg

State

VA

Zip Code

20175-5629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BIA Financial Network, In-  
c.

Occupation

Financial Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1560.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.37911

Amount of Each Receipt this Period

83.34

Reattribute: (See Memo)

**B.**

Full Name (Last, First, Middle Initial)

William B. Redpath

Mailing Address 827 Anthony Ct SE

City

Leesburg

State

VA

Zip Code

20175-5629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BIA Financial Network, In-  
c.

Occupation

Financial Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6560.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.37914

Amount of Each Receipt this Period

5000.00

Reattribute: (See Memo)

**C.**

Full Name (Last, First, Middle Initial)

William B. Redpath

Mailing Address 827 Anthony Ct SE

City

Leesburg

State

VA

Zip Code

20175-5629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BIA Financial Network, In-  
c.

Occupation

Financial Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6643.38

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.37917

Amount of Each Receipt this Period

83.34

Reattribute: (See Memo)

**SUBTOTAL** of Receipts This Page (optional) .....

5166.68

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 153 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

John H. Ring

Mailing Address 2901 Oakdale Rd

City

Charlotte

State

NC

Zip Code

28216-1476

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36174

Amount of Each Receipt this Period

25.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Steven M. Roberson

Mailing Address 7923 E Monte Carlo Ave

City

Anaheim

State

CA

Zip Code

92808-1562

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Anaheim

Occupation

Police Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36187

Amount of Each Receipt this Period

25.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Gil Robinson

Mailing Address 5150 Broadway St # 610

City

San Antonio

State

TX

Zip Code

78209-5710

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PRINCETON MEDICAL GROUP

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.36206

Amount of Each Receipt this Period

500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 154 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Jim R. Rogers

Mailing Address PO Box 12773

City

Odessa

State

TX

Zip Code

79768-2773

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Premier Precision Mfg, Inc

Occupation

Machinist/Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.36216

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Paul D. Rolig

Mailing Address 9877 W Ripley St

City

Boise

State

ID

Zip Code

83704-2758

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Semi-Retired

Occupation

Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.36218

Amount of Each Receipt this Period

20.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Neil A. Roper

Mailing Address 6961 Wittenham Cv

City

Memphis

State

TN

Zip Code

38119-7831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Poplar Pubs, Inc.

Occupation

Restaurant Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.36230

Amount of Each Receipt this Period

25.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

145.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 155 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Leslie Rose

Mailing Address 330 S Ocean Blvd Apt 3B

City

Palm Beach

State

FL

Zip Code

33480-4263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.36234

Amount of Each Receipt this Period

1000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Robert Scott Rose

Mailing Address 2208 Kelly Rd

City

Apex

State

NC

Zip Code

27502-9562

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IBM Corp.

Occupation  
Senior IT Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36235

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Thomas Rose

Mailing Address 1503 Morgan Rd  
PO Box 518

City

Benson

State

NC

Zip Code

27504-0518

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
L J Rogers Jr

Occupation  
transportation broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.37943

Amount of Each Receipt this Period

85.00

Treasurer's Best Efforts  
(See Memo)

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional) .....

1030.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 156 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Thomas Rose

Mailing Address 1503 Morgan Rd  
PO Box 518

City Benson State NC Zip Code 27504-0518

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
L J Rogers Jr

Occupation  
transportation broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37942

Amount of Each Receipt this Period

85.00

Treasurer's Best Efforts  
(See Memo)

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

Thomas Rose

Mailing Address 1503 Morgan Rd  
PO Box 518

City Benson State NC Zip Code 27504-0518

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
L J Rogers Jr

Occupation  
transportation broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36236

Amount of Each Receipt this Period

85.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Brandon Ross

Mailing Address 15 Wieuca Trce NE

City Atlanta State GA Zip Code 30342-3856

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Sockeye Networks

Occupation  
computer engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36254

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

115.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 157 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

David P. Ruby

Mailing Address 1119 E Le Marche Ave

City

Phoenix

State

AZ

Zip Code

85022-3136

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Phoenix Emergency Physi-  
cian In

Occupation

Emergency Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36283

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Susan S. Ruch

Mailing Address 5 Cuesta Ln

City

Santa Fe

State

NM

Zip Code

87508-8331

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Ranching, Real Estate Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36284

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Susan S. Ruch

Mailing Address 5 Cuesta Ln

City

Santa Fe

State

NM

Zip Code

87508-8331

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Ranching, Real Estate Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.36285

Amount of Each Receipt this Period

1000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 158 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Chris J. Rufer

Mailing Address 724 Main St

City

Woodland

State

CA

Zip Code

95695-3407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Morning Star Company

Occupation

Agriculturalist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.36288

Amount of Each Receipt this Period

5000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Rene Antonio Ruiz

Mailing Address 115 Dunster Rd

City

Jamaica Plain

State

MA

Zip Code

02130-2733

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Index Solutions

Occupation

programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1776.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.36292

Amount of Each Receipt this Period

1776.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Thomas Runnels

Mailing Address 261 W Main St

City

Newark

State

DE

Zip Code

19711-3237

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.36296

Amount of Each Receipt this Period

200.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

6976.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 159 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Michael Russell

Mailing Address 1515 Harbour View Dr

City

Kill Devil HI

State

NC

Zip Code

27948-8651

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University Health Systems  
East

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36308

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Mark W. Rutherford

Mailing Address 151 N Delaware St Ste 1900

City

Indianapolis

State

IN

Zip Code

46204-2505

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Thrasher Buschmann Griffi-  
th Voelkel

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36311

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Dan L. Rycroft

Mailing Address 1658 Palau Pl

City

Costa Mesa

State

CA

Zip Code

92626-3716

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BP Chemicals

Occupation  
Facility Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36321

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

90.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 160 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

John A. Salvette

Mailing Address 2016 Devonshire Rd

City

Ann Arbor

State

MI

Zip Code

48104-4058

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hayes Lemmerz Internatio-  
nal

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.36351

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Frank Sarwark

Mailing Address 5916 S Kenneth Pl

City

Tempe

State

AZ

Zip Code

85283-3008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Consolidated Auto Sales

Occupation

Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.36369

Amount of Each Receipt this Period

25.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Chuck Schaffstall

Mailing Address 54 Fox Chapel Dr

City

Orchard Park

State

NY

Zip Code

14127-3024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.36389

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

125.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 161 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Chuck Schaffstall

Mailing Address 54 Fox Chapel Dr

City

Orchard Park

State

NY

Zip Code

14127-3024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.36390

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Brian Schnell

Mailing Address 10201 Grosvenor Pl  
Apt 725

City

Rockville

State

MD

Zip Code

20852-4613

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. Navy

Occupation  
Naval Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36409

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Steven Schoch

Mailing Address 974 Bluebonnet Dr

City

Sunnyvale

State

CA

Zip Code

94086-6756

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
StarNet Communications Co-  
rp

Occupation  
Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36410

Amount of Each Receipt this Period

45.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

125.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 162 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

David K. Schrader

Mailing Address 50 17th St  
# A

City State Zip Code  
Hermosa Beach CA 90254-3408

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AT&T NCR

Occupation  
Computer R&D Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36418

Amount of Each Receipt this Period

25.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Heather Scott

Mailing Address 1281 Gay Winds Dr

City State Zip Code  
Mount Juliet TN 37122-6533

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Audio Electronics

Occupation  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36461

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Heather Scott

Mailing Address 1281 Gay Winds Dr

City State Zip Code  
Mount Juliet TN 37122-6533

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Audio Electronics

Occupation  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.76

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.36462

Amount of Each Receipt this Period

17.76

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

142.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 163 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Heather Scott

Mailing Address 1281 Gay Winds Dr

City

Mount Juliet

State

TN

Zip Code

37122-6533

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Audio Electronics

Occupation  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.52

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.36463

Amount of Each Receipt this Period

17.76

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Rick Secula

Mailing Address 8802 Thorntree Dr

City

Grosse Ile

State

MI

Zip Code

48138-1531

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ford Motor Company

Occupation  
Millwright

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36473

Amount of Each Receipt this Period

25.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Gerald Serafino

Mailing Address 1 Park Rd

City

Roswell

State

NM

Zip Code

88201-3932

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36486

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

72.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 164 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Charles Shaw

Mailing Address 123 Dorando Way

City

Liverpool

State

NY

Zip Code

13090-3739

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.36514

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Thomas J. Shepard

Mailing Address 3378 Black Willow Trl

City

Deland

State

FL

Zip Code

32724-3431

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.36527

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Thomas J. Shepard

Mailing Address 3378 Black Willow Trl

City

Deland

State

FL

Zip Code

32724-3431

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.36528

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 165 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mark Shoup

Mailing Address 3105 Whispering Dr

City

Prince Frederick

State

MD

Zip Code

20678-3387

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KM Wholesalers, Inc

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.36543

Amount of Each Receipt this Period

500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Phillip Showers

Mailing Address 1900 Dunham Cir NW

City

Huntsville

State

AL

Zip Code

35816-1743

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36544

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

John Shuey

Mailing Address 4457 Young Dr

City

Carrollton

State

TX

Zip Code

75010-1145

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36545

Amount of Each Receipt this Period

25.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

575.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 166 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Robert Shuford

Mailing Address 6 Whartons Way

City

Hampton

State

VA

Zip Code

23669-1094

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Old Point National Bank

Occupation

Information Systems banki

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1045.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36546

Amount of Each Receipt this Period

85.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Robban A. Sica

Mailing Address 37 Lakewood Dr

City

Trumbull

State

CT

Zip Code

06611-2446

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Center for the Healing Ar-  
t, PC

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36552

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Robert V. Sigler

Mailing Address 24177 Jamore Dr

City

Seaford

State

DE

Zip Code

19973-7738

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
A.K.S. Assocs., Inc.

Occupation

Registered Land Surveyor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.36554

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

285.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 167 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

John C. Simms

Mailing Address 2740 Washington St

City

Columbus

State

IN

Zip Code

47201-2950

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Marquette Univer

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36562

Amount of Each Receipt this Period

10.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

John C. Simms

Mailing Address 2740 Washington St

City

Columbus

State

IN

Zip Code

47201-2950

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Marquette Univer

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.36563

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Carol Ann Simpson

Mailing Address PO Box 530

City

Groveland

State

CA

Zip Code

95321-0530

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.36566

Amount of Each Receipt this Period

250.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

360.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 168 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Rebecca Sink-Burris

Mailing Address 1992 Bryants Crk

City

Bloomington

State

IN

Zip Code

47408-9735

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

687.76

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.36579

Amount of Each Receipt this Period

500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Richard Sinnott

Mailing Address 1025 Jamaica Ave

City

Fort Pierce

State

FL

Zip Code

34982-4327

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southern Eagle Distributi-  
ng

Occupation  
Executive Assistant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.36584

Amount of Each Receipt this Period

150.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

John Skinner

Mailing Address 1850 Alice St Apt 912

City

Oakland

State

CA

Zip Code

94612-4130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.36599

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 169 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Donald G. Smith

Mailing Address 13060 Burbank Blvd Apt 16

City

Sherman Oaks

State

CA

Zip Code

91401-5411

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
L A Valley College

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.36618

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Don R. Smith

Mailing Address 703 W Holly Trl

City

Holly Lake Ranch

State

TX

Zip Code

75765-7223

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.36615

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Frank Smith

Mailing Address 135 Mountain View Dr #3

City

Tustin

State

CA

Zip Code

92780-3048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36619

Amount of Each Receipt this Period

1000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 170 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

James T. Smith

Mailing Address 17 Shasta Ter

City

Beacon Falls

State

CT

Zip Code

06403-1315

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Marquette Medical Systems

Occupation

Dist Service Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.36624

Amount of Each Receipt this Period

20.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Lloyd E. Smith

Mailing Address 21 Franklin Ave

City

Oswego

State

NY

Zip Code

13126-1755

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HYCO Tunnel & Sewer Co.

Occupation

Land Speculator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.36629

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Clifford B. Sondock

Mailing Address 6 Crane Rd

City

Huntington

State

NY

Zip Code

11743-1733

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Spiegel Assoc.

Occupation

Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36654

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

220.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 171 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Hans O. Sorensen

Mailing Address 360 Leland Ave

City

Palo Alto

State

CA

Zip Code

94306-1127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36657

Amount of Each Receipt this Period

35.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Scott Spencer

Mailing Address 3715 Yolando Rd

City

Baltimore

State

MD

Zip Code

21218-2042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Johns Hopkins University

Occupation

Programmer/Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36690

Amount of Each Receipt this Period

85.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Leon C. Sperry

Mailing Address PO Box 1114

City

Keaau

State

HI

Zip Code

96749-1114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36691

Amount of Each Receipt this Period

25.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

145.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 172 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

John C. Sproul

Mailing Address 397 Raines Park

City

Rochester

State

NY

Zip Code

14613-1118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36706

Amount of Each Receipt this Period

20.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Aaron Starr

Mailing Address 4048 Tucson St

City

Simi Valley

State

CA

Zip Code

93063-1144

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Haas Automation, Inc.

Occupation  
Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5070.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36738

Amount of Each Receipt this Period

10.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

John Stavert

Mailing Address 238 Chahyga Cir

City

Loudon

State

TN

Zip Code

37774-2827

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.36740

Amount of Each Receipt this Period

200.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

230.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 173 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

John Ames Steffian

Mailing Address PO Box 395

City

Ashby

State

MA

Zip Code

01431-0395

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Steffian & Steffian, LLC

Occupation

President, Owner

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36752

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Mac Stevens

Mailing Address 415 NE 6th St

City

Newport

State

OR

Zip Code

97365-2805

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Formfactor, Inc

Occupation

Computer Programmer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.36773

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

John S. Stewart

Mailing Address 855 Bryn Mawr Dr

City

Columbus

State

OH

Zip Code

43230-3840

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TranInternational

Occupation

Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36777

Amount of Each Receipt this Period

45.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

325.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 174 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Scott A. Stewart

Mailing Address 8401 E Appomattox St

City

Tucson

State

AZ

Zip Code

85710-2922

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Raytheon

Occupation  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1025.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36778

Amount of Each Receipt this Period

75.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Thomas R. Stewart

Mailing Address 2916 County Road 807

City

Cleburne

State

TX

Zip Code

76031-7963

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.36779

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Michael Stoor

Mailing Address 13220 Bozeman Trl

City

Elbert

State

CO

Zip Code

80106-8800

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Comfort Dental

Occupation  
Dentist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.36793

Amount of Each Receipt this Period

250.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

575.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 175 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Steven L. Straley

Mailing Address 3658 N Perry Park Rd

City

Sedalia

State

CO

Zip Code

80135-8601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lockheed Martin

Occupation  
Programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36799

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

James G. Strickland

Mailing Address 1312 S Westcliff Pl Apt 57

City

Spokane

State

WA

Zip Code

99224-2057

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36810

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

John Sturgeon

Mailing Address 315 Roane St

City

Charleston

State

WV

Zip Code

25302-2122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36832

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

180.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 176 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

John Sturgeon

Mailing Address 315 Roane St

City

Charleston

State

WV

Zip Code

25302-2122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.36833

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

William B. Stutler

Mailing Address 31 Hemlock Rdg

City

New Milford

State

CT

Zip Code

06776-4516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Evening Out Inc

Occupation

Dinner/Theatre Owner /P

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36834

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Joseph Sugarman

Mailing Address 3066 S Kihei Rd

City

Kihei

State

HI

Zip Code

96753-9615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.36836

Amount of Each Receipt this Period

1000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 177 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Robert Sullentrup

Mailing Address 140 Hunters Rdg

City

Saint Charles

State

MO

Zip Code

63301-0427

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Collaboratech

Occupation

Computer Tech.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2052.93

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36837

Amount of Each Receipt this Period

20.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Timothy J. Swenson

Mailing Address 210 Vine St  
PO Box 146

City

Arnegard

State

ND

Zip Code

58835-0146

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wilmington Lutheran Church

Occupation

Pastor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36867

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Linda R. Swift

Mailing Address 307 Mountain Rd

City

Mc Donald

State

TN

Zip Code

37353-4903

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Bookkeeper

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.36870

Amount of Each Receipt this Period

300.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

370.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 178 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN NATIONAL COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)

Randy Szabla

Mailing Address 32034 W 13 Mile Rd

City

Farmington Hills

State

MI

Zip Code

48334-2000

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Wayne State University

Occupation  
Technician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.36876

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Lawrence F. Taylor

Mailing Address 6300 Goliad Ave

City

Dallas

State

TX

Zip Code

75214-3601

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
BearingPoint, Inc.

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.36907

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Marion L. Taylor

Mailing Address HC 2 Box 247

City

Patagonia

State

AZ

Zip Code

85624-9707

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.36908

Amount of Each Receipt this Period

20.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

320.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 179 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

John M. Taylor, MD

Mailing Address 1 Scenic Dr Unit 1110

City

Highlands

State

NJ

Zip Code

07732-1321

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Samra Group

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10595.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36891

Amount of Each Receipt this Period

85.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

John M. Taylor, MD

Mailing Address 1 Scenic Dr Unit 1110

City

Highlands

State

NJ

Zip Code

07732-1321

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Samra Group

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10695.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.36892

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Charles D. Test

Mailing Address 2710 2nd Ave S

City

Minneapolis

State

MN

Zip Code

55408-1710

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Landlord

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36918

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

285.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 180 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN NATIONAL COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)

Steven Thomas

Mailing Address 366 Brannan St

City

San Francisco

State

CA

Zip Code

94107-1830

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.36943

Amount of Each Receipt this Period

99.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

John Thompson

Mailing Address 9308 Russell Ave S

City

Minneapolis

State

MN

Zip Code

55431-2430

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Agene Systems

Occupation

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36950

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Joseph P. Thompson

Mailing Address 7474 E Arkansas Ave Apt 3010

City

Denver

State

CO

Zip Code

80231-2546

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CDOT

Occupation

Planner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36951

Amount of Each Receipt this Period

20.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

169.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 181 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

William Thompson

Mailing Address 3255 Lake Artesia Rd

City

Faison

State

NC

Zip Code

28341-5679

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.36957

Amount of Each Receipt this Period

15.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Rodney Threadgill

Mailing Address 617 W Meseto Ave

City

Mesa

State

AZ

Zip Code

85210-7547

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Motorola, Inc

Occupation

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36965

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Charles Tolman

Mailing Address 7918 Cowan Ave

City

Los Angeles

State

CA

Zip Code

90045-1139

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Treyarch Corp.

Occupation

Technical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.36996

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

145.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 182 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Joel I. Trammell

Mailing Address 1422 Palomino Ridge Dr

City

Austin

State

TX

Zip Code

78733-6041

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NetQoS

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37010

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Patrick Traynor

Mailing Address 2040 Estate View Way

City

San Jose

State

CA

Zip Code

95148-1907

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IXYS Corp.

Occupation  
Accountant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.37019

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Arnold Trembley

Mailing Address 12066 Charter House Ln Apt E

City

Saint Louis

State

MO

Zip Code

63146-5279

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MasterCard International

Occupation  
Senior Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.37023

Amount of Each Receipt this Period

200.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

330.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 183 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Catherine G. Tripp

Mailing Address 89 Martha Ave

City

San Francisco

State

CA

Zip Code

94131-2849

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FiQuest, Inc.

Occupation

Mortgage Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37028

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Larimore O. Trippet

Mailing Address 10514 Rue D Flore

City

Reno

State

NV

Zip Code

89511-4338

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Prof. Financial Advisors

Occupation

Financial Planner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37029

Amount of Each Receipt this Period

35.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Gregory D. Troxel

Mailing Address PO Box 225

City

Stow

State

MA

Zip Code

01775-0225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Verizon

Occupation

Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37033

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

115.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 184 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Roy C. Turnbull

Mailing Address 4912 Royal Cove Dr

City

Shelby Township

State

MI

Zip Code

48316-1503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TRW Vehicle Safety Systems

Occupation  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37051

Amount of Each Receipt this Period

40.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Timothy P. Twigg

Mailing Address 29016 Hill and Dale Dr

City

Mechanicsville

State

MD

Zip Code

20659-4714

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DOD

Occupation  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37058

Amount of Each Receipt this Period

10.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Matthew Ungs

Mailing Address 77 W Huron St

City

Chicago

State

IL

Zip Code

60610-4052

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Prudential

Occupation  
Healthcare Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.37070

Amount of Each Receipt this Period

75.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

125.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 185 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Greg Utas

Mailing Address 2400 State Highway 121 Apt 1907

City

Euleess

State

TX

Zip Code

76039-4092

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

software Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37073

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Greg Utas

Mailing Address 2400 State Highway 121 Apt 1907

City

Euleess

State

TX

Zip Code

76039-4092

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

software Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.37074

Amount of Each Receipt this Period

500.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

James J. Van Dress

Mailing Address 3915 S Flagler Dr Apt 112

City

West Palm Bch

State

FL

Zip Code

33405-2387

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ernst & Young

Occupation

auditor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37083

Amount of Each Receipt this Period

35.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

585.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 186 / 284

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Edwin Vare

Mailing Address 22 Wildrose Ave

City

Guilford

State

CT

Zip Code

06437-2565

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	8	/	2	0	0	8

Transaction ID: SA11AI.37104

Amount of Each Receipt this Period

200.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Sue Velie

Mailing Address 2620 E 150 N

City

Lagrange

State

IN

Zip Code

46761-9694

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jeffrey L. BssettOccupation  
Dental Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	1	/	2	0	0	8

Transaction ID: SA11AI.37113

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

J. D. Von Pischke

Mailing Address 2529 Trophy Ln

City

Reston

State

VA

Zip Code

20191-2126

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	9	/	2	0	0	8

Transaction ID: SA11AI.37138

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

730.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 187 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN NATIONAL COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)

James S. Voris

Mailing Address 20 Warren Manor Ct

City

Cockeysville

State

MD

Zip Code

21030-2741

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Aether Systems, Inc

Occupation

Software Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37141

Amount of Each Receipt this Period

40.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Scott Vorrath

Mailing Address 1154 E Rauch Rd

City

Erie

State

MI

Zip Code

48133-9745

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Vorrath Ent.

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37142

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Robert H. Wagner

Mailing Address 1570 East Ave Apt 416

City

Rochester

State

NY

Zip Code

14610-1638

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.37154

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

170.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 188 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Steven G. Wainio

Mailing Address 225 E 8th Ave Apt B10

City

Longmont

State

CO

Zip Code

80501-4662

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37159

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Arch Wakefield

Mailing Address 3047 Point Clear Dr

City

Tega Cay

State

SC

Zip Code

29708-8542

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37160

Amount of Each Receipt this Period

75.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Anthony E. Wall

Mailing Address 354 Summerville Rd

City

Kingsport

State

TN

Zip Code

37663-3007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jay Construction

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37165

Amount of Each Receipt this Period

15.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

120.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 189 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Richard Waller

Mailing Address 6129 Beech Tree Dr

City

Alexandria

State

VA

Zip Code

22310-2240

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dell Inc

Occupation

Solutions Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.37171

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Anthony D. Ward

Mailing Address 3262 NE 88th Ave

City

Portland

State

OR

Zip Code

97220-5253

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Multnomah County

Occupation

Librarian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37187

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Mary Warner-Nagel

Mailing Address PO Box 2823

City

Santa Fe

State

NM

Zip Code

87504-2823

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NALSAS/SFCS

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.37200

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

330.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 190 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Mary Warner-Nagel

Mailing Address PO Box 2823

City

Santa Fe

State

NM

Zip Code

87504-2823

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NALSAS/SFCS

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.37201

Amount of Each Receipt this Period

50.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Dale R. Warren

Mailing Address 2035 Sweetgum Trl

City

Cumming

State

GA

Zip Code

30041-5988

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Amoco

Occupation

Research Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37202

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Gene Warren

Mailing Address 108 Glenwood St

City

Mobile

State

AL

Zip Code

36606-1906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Cronus Group, LLC

Occupation

IT Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37203

Amount of Each Receipt this Period

20.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 191 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN NATIONAL COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)

Wendell L. Weatherford

Mailing Address 1311 July Dr

City

Austin

State

TX

Zip Code

78753-2923

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
H&R Block

Occupation

Income Tax Preparer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.37225

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

William Welch

Mailing Address 4122 Meadow Park Ct

City

Auburn

State

CA

Zip Code

95602-8443

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.60

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.37260

Amount of Each Receipt this Period

177.60

Contribution

**C.**

Full Name (Last, First, Middle Initial)

John C. Wendell

Mailing Address 2834 Ventura Ave

City

Santa Rosa

State

CA

Zip Code

95403-2227

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Icore International

Occupation

Machinist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.37265

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

527.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 192 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Jeffrey J. Weston

Mailing Address 1255 NW 9th Ave Apt 301

City

Portland

State

OR

Zip Code

97209-2887

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Eleven Wireless

Occupation

SW Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37279

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Neil Wetmore

Mailing Address 31 Vera St

City

East Haven

State

CT

Zip Code

06512-3544

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
All About You Homecare

Occupation

Home Health Aid

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37281

Amount of Each Receipt this Period

85.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Jason White

Mailing Address 10871 Pittsburg Mine Rd

City

Nevada City

State

CA

Zip Code

95959-3478

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37298

Amount of Each Receipt this Period

50.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

235.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 193 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**LIBERTARIAN NATIONAL COMMITTEE**

**A.**

Full Name (Last, First, Middle Initial)

George R. Whitfield

Mailing Address 45107 Tarney Wood Dr

City

Portsmouth

State

VA

Zip Code

23703-0000

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Halcyon Search International

Occupation

Executive Search Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.37308

Amount of Each Receipt this Period

500.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

George R. Whitfield

Mailing Address 45107 Tarney Wood Dr

City

Portsmouth

State

VA

Zip Code

23703-0000

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Halcyon Search International

Occupation

Executive Search Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6317.76

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.37309

Amount of Each Receipt this Period

17.76

Contribution

**C.**

Full Name (Last, First, Middle Initial)

George R. Whitfield

Mailing Address 45107 Tarney Wood Dr

City

Portsmouth

State

VA

Zip Code

23703-0000

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Halcyon Search International

Occupation

Executive Search Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8093.76

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.37310

Amount of Each Receipt this Period

1776.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

2293.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 194 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

George R. Whitfield

Mailing Address 45107 Tarney Wood Dr

City

Portsmouth

State

VA

Zip Code

23703-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Halcyon Search Internatio-  
nal

Occupation

Executive Search Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8193.76

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.37311

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

George R. Whitfield

Mailing Address 45107 Tarney Wood Dr

City

Portsmouth

State

VA

Zip Code

23703-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Halcyon Search Internatio-  
nal

Occupation

Executive Search Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8292.76

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.37312

Amount of Each Receipt this Period

99.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

John E. Wieck

Mailing Address PO Box 706

City

Bryantown

State

MD

Zip Code

20617-0706

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.37327

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

299.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 195 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Jerald Wienke

Mailing Address PO Box 990

City

Kingman

State

AZ

Zip Code

86402-0990

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.37332

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

David A. Wiester

Mailing Address 4124 Longfellow Ave

City

Minneapolis

State

MN

Zip Code

55407-3439

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AmEx Financial Advisors

Occupation

warehouse lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37335

Amount of Each Receipt this Period

30.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Bradley Wiitala

Mailing Address PO Box 733

City

Big Pine

State

CA

Zip Code

93513-0733

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Civil Service

Occupation

electronic engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37338

Amount of Each Receipt this Period

15.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

145.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 196 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Brett E. Wilhelm

Mailing Address PO Box 940

City

Freeland

State

WA

Zip Code

98249-0940

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tru G. Wilhelm, Inc.

Occupation

Corp. Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.37346

Amount of Each Receipt this Period

30.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

James A. Wilkinson

Mailing Address 1714 W 11th St

City

Freeport

State

TX

Zip Code

77541-5021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.37352

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

James A. Wilkinson

Mailing Address 1714 W 11th St

City

Freeport

State

TX

Zip Code

77541-5021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.37353

Amount of Each Receipt this Period

75.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

155.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 197 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

John D. Williams

Mailing Address 3 Clover Leaf Ct

City

Savoy

State

IL

Zip Code

61874-9759

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U of IL

Occupation  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37361

Amount of Each Receipt this Period

40.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Charles W. Wilson

Mailing Address PO Box 454

City

Red Oak

State

IA

Zip Code

51566-0454

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37377

Amount of Each Receipt this Period

50.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Mike Wilson

Mailing Address 422 Jupiter Ave

City

Salina

State

KS

Zip Code

67401-7379

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kansas State University

Occupation  
Retired Associate Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.37387

Amount of Each Receipt this Period

100.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

190.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 198 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

John U. Wisotzkey

Mailing Address 504 Villa Ter

City

York

State

PA

Zip Code

17403-3628

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Maple Press Co.

Occupation  
Printer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.37397

Amount of Each Receipt this Period

200.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Chris Witzky

Mailing Address 54 Sachem Dr

City

Glastonbury

State

CT

Zip Code

06033-2726

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Tech.

Occupation  
financial analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.37399

Amount of Each Receipt this Period

250.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Emil R. Wolanski

Mailing Address 4659 Landchester Rd

City

Cleveland

State

OH

Zip Code

44109-4571

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Deaconess Hospital

Occupation  
Shipping & Receiving

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37400

Amount of Each Receipt this Period

35.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

485.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 199 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

John T. Wynne

Mailing Address 4500 Olentangy Blvd

City

Columbus

State

OH

Zip Code

43214-2513

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37454

Amount of Each Receipt this Period

250.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

David A. Young

Mailing Address 2825 S Washington Ave Ofc

City

Titusville

State

FL

Zip Code

32780-5028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Boeing

Occupation

Technical Writer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.37474

Amount of Each Receipt this Period

35.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Alexander Yuill-Thornton

Mailing Address PO Box 4338

City

San Rafael

State

CA

Zip Code

94913-4338

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Solstice Company

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.37493

Amount of Each Receipt this Period

30.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

315.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 200 / 284

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Jan-Mark Zentler

Mailing Address 1012 Almond Ave

City

Patterson

State

CA

Zip Code

95363-9359

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Laurence Livermore Nation-  
al Laboratory

Occupation  
Contractor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.37509

Amount of Each Receipt this Period

100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Richard P. Zizan

Mailing Address PO Box 143

City

Rillton

State

PA

Zip Code

15678-0143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pioneer Mfg.Co.

Occupation  
Mech. Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.37520

Amount of Each Receipt this Period

500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

86659.52

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 201 / 284

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
BOB BARR LEADERSHIP FUND, THE

Mailing Address 900 Circle 75 Parkway Suite 1280  
PMB 246

City State Zip Code  
Atlanta GA 30339

FEC ID number of contributing  
federal political committee.

**C** C00340190

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA11C.37873

Amount of Each Receipt this Period

2500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

2500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 202 / 284

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Elizabeth Brooks

Mailing Address 870 Ribaut Rd

City

Beaufort

State

SC

Zip Code

29902-5428

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: SA15.37871

Amount of Each Receipt this Period

170.00

COBRA payment from employ-  
ee

**SUBTOTAL** of Receipts This Page (optional) .....

170.00

**TOTAL** This Period (last page this line number only) .....

170.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 203 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Advanced Mailing Services, LLC

Mailing Address 14970 Farm Creek Drive

City Woodbridge State VA Zip Code 22191-3550

Purpose of Disbursement  
Non Candidate Party Mailing Serv

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37638

Date of Disbursement

07 / 03 / 2008

Amount of Each Disbursement this Period

2919.88

**B.** Full Name (Last, First, Middle Initial)  
Advanced Mailing Services, LLC

Mailing Address 14970 Farm Creek Drive

City Woodbridge State VA Zip Code 22191-3550

Purpose of Disbursement  
Non Candidate Party Mailing Service

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37771

Date of Disbursement

07 / 15 / 2008

Amount of Each Disbursement this Period

3000.09

**C.** Full Name (Last, First, Middle Initial)  
Advanced Mailing Services, LLC

Mailing Address 14970 Farm Creek Drive

City Woodbridge State VA Zip Code 22191-3550

Purpose of Disbursement  
Non Candidate Party Mailing Serv

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37640

Date of Disbursement

07 / 28 / 2008

Amount of Each Disbursement this Period

3469.01

**SUBTOTAL** of Disbursements This Page (optional) .....

9388.98

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 204 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Advanced Mailing Services, LLC

Mailing Address 14970 Farm Creek Drive

City Woodbridge State VA Zip Code 22191-3550

Purpose of Disbursement  
Non Candidate Party Mailing Serv

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37641

Date of Disbursement

07 / 31 / 2008

Amount of Each Disbursement this Period

3556.30

**B.** Full Name (Last, First, Middle Initial)  
American National Insurance Co.

Mailing Address Attn: Lea Pollack  
P. O. Box 1830 - Pension Dept.

City Galvison State TX Zip Code 77550-1830

Purpose of Disbursement  
401k Contributions and Fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37642

Date of Disbursement

07 / 31 / 2008

Amount of Each Disbursement this Period

732.34

**C.** Full Name (Last, First, Middle Initial)  
AMGRO, Inc.

Mailing Address 100 N. Parkway  
PO Box 15089

City Worcester State MA Zip Code 01615-0089

Purpose of Disbursement  
D and O Insurance

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37643

Date of Disbursement

07 / 31 / 2008

Amount of Each Disbursement this Period

821.02

**SUBTOTAL** of Disbursements This Page (optional) .....

5109.66

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 205 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Albert Sr. Apple

Mailing Address PO Box 234

City  
Martin

State  
SD

Zip Code  
57551-0234

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37539

Date of Disbursement

07 / 23 / 2008

Amount of Each Disbursement this Period

420.00

B.

Full Name (Last, First, Middle Initial)

Arent Fox

Mailing Address Craig Engle  
1050 Conn Ave NW

City  
Washington

State  
DC

Zip Code  
20036-5339

Purpose of Disbursement  
Legal Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37644

Date of Disbursement

07 / 15 / 2008

Amount of Each Disbursement this Period

971.00

C.

Full Name (Last, First, Middle Initial)

AT&T - Mobility

Mailing Address PO Box 6463

City  
Carol Stream

State  
IL

Zip Code  
60197-6463

Purpose of Disbursement  
Phone and Data Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37645

Date of Disbursement

07 / 03 / 2008

Amount of Each Disbursement this Period

118.83

SUBTOTAL of Disbursements This Page (optional) .....

1509.83

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 206 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) AT&T - Mobility	<b>Transaction ID:</b> SB21B.37646 <b>Date of Disbursement</b>
Mailing Address PO Box 6463	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 3 / 2 0 0 8</div> </div>
City Carol Stream State IL Zip Code 60197-6463	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Phone and Data Services Candidate Name	<div> <div>124.96</div> <div>001</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Authorize.net	<b>Transaction ID:</b> SB21B.37647 <b>Date of Disbursement</b>
Mailing Address 915 South 500 East Suite 200	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 8</div> </div>
City American Fork State UT Zip Code 84003-0000	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Credit Card Processing Fee Candidate Name	<div> <div>40.20</div> <div>001</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) B & B Duplicators	<b>Transaction ID:</b> SB21B.37648 <b>Date of Disbursement</b>
Mailing Address 818 18th Street NW LL15	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20006-0000	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Non Candidate Party Printing Serv Candidate Name	<div> <div>396.56</div> <div>003</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**561.72**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 207 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) BentleyForbes Watergate LLC Mailing Address PO Box 73378	<b>Transaction ID:</b> SB21B.37649 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 0 8</div> </div>
City Cleveland State OH Zip Code 44193-3378 Purpose of Disbursement Office Rent, Tax, Maint & Utilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>9903.66</div> <div>001</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Darryl Bonner Mailing Address 6151 Reach Street City Philadelphia State PA Zip Code 19111-0000 Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.37773 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>6112.00</div> <div>001</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Darryl Bonner Mailing Address 6151 Reach Street City Philadelphia State PA Zip Code 19111-0000 Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.37541 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>6376.00</div> <div>001</div> Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) .....

22391.66

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 208 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Darryl Bonner	<b>Transaction ID:</b> SB21B.37542 <b>Date of Disbursement</b>																				
Mailing Address 6151 Reach Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	3		2	0	0	8												
City Philadelphia State PA Zip Code 19111-0000	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name	<table border="1"> <tr> <td colspan="10">8484.00</td> </tr> </table>	8484.00																			
8484.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 001																					
<b>B.</b> Full Name (Last, First, Middle Initial) Darryl Bonner	<b>Transaction ID:</b> SB21B.37543 <b>Date of Disbursement</b>																				
Mailing Address 6151 Reach Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	8		2	0	0	8												
City Philadelphia State PA Zip Code 19111-0000	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name	<table border="1"> <tr> <td colspan="10">1056.95</td> </tr> </table>	1056.95																			
1056.95																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 001																					
<b>C.</b> Full Name (Last, First, Middle Initial) Darryl Bonner	<b>Transaction ID:</b> SB21B.37544 <b>Date of Disbursement</b>																				
Mailing Address 6151 Reach Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	4		2	0	0	8												
City Philadelphia State PA Zip Code 19111-0000	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name	<table border="1"> <tr> <td colspan="10">735.00</td> </tr> </table>	735.00																			
735.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 001																					

**SUBTOTAL** of Disbursements This Page (optional) .....

10275.95

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 209 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Darryl Bonner Mailing Address 6151 Reach Street	<b>Transaction ID:</b> SB21B.37545 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 3 / 2 0 0 8</div> </div>
City Philadelphia State PA Zip Code 19111-0000 Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>1348.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Louise Calise Mailing Address 6802 Dante Ct City Springfield State VA Zip Code 22152-3328 Purpose of Disbursement Employee Net Pay Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> SB21B.37546 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 9 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1272.81</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Louise Calise Mailing Address 6802 Dante Ct City Springfield State VA Zip Code 22152-3328 Purpose of Disbursement Office Supplies Reimbursement (See Memo) Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> SB21B.37548 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>25.14</div>
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<div>2645.95</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 210 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Michaels Craft and Supply

Mailing Address 1110 Stafford Market Plc

City  
Stafford

State  
VA

Zip Code  
22556-4524

Purpose of Disbursement  
Office Supplies

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37548.0

Date of Disbursement

07 / 15 / 2008

Amount of Each Disbursement this Period

25.14

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Louise Calise

Mailing Address 6802 Dante Ct

City  
Springfield

State  
VA

Zip Code  
22152-3328

Purpose of Disbursement  
Employee Net Pay

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37547

Date of Disbursement

07 / 23 / 2008

Amount of Each Disbursement this Period

1286.81

C.

Full Name (Last, First, Middle Initial)

Campaign for Liberty

Mailing Address 6186 Old Franconia Rd. #B  
Attn: Steve Bierfeldt

City  
Alexandria

State  
VA

Zip Code  
22310-0000

Purpose of Disbursement  
Rally for the Republic Statesman Sponsor

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37652

Date of Disbursement

07 / 30 / 2008

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) .....

3286.81

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 211 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
Carefirst CapitalCare (Robert)

Mailing Address PO Box 79749

City Baltimore State MD Zip Code 21279-0749

Purpose of Disbursement  
Employee Health

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.37653

Date of Disbursement

07 / 23 / 2008

Amount of Each Disbursement this Period

103.00

**B.**

Full Name (Last, First, Middle Initial)  
Christy Carmody

Mailing Address 1751 Camarillo Drive

City N. Las Vegas State NV Zip Code 89031-0000

Purpose of Disbursement  
Non Candidate Party Editing and Graghics

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.37549

Date of Disbursement

07 / 15 / 2008

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Commonwealth Digital Office Solutions

Mailing Address 21205 Ridgetop Circle

City Sterling State VA Zip Code 20166-6501

Purpose of Disbursement  
Copier Maint

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.37654

Date of Disbursement

07 / 03 / 2008

Amount of Each Disbursement this Period

200.53

**SUBTOTAL** of Disbursements This Page (optional) .....

1303.53

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 212 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Ronald Cook	<b>Transaction ID:</b> SB21B.37550 <b>Date of Disbursement</b>																				
Mailing Address 1838 Powderhorn Ln.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	0		2	0	0	8												
City Katy State TX Zip Code 77493-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name	<table border="1"> <tr> <td colspan="10">586.50</td> </tr> </table>	586.50																			
586.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Ronald Cook	<b>Transaction ID:</b> SB21B.37551 <b>Date of Disbursement</b>																				
Mailing Address 1838 Powderhorn Ln.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	0		2	0	0	8												
City Katy State TX Zip Code 77493-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name	<table border="1"> <tr> <td colspan="10">1255.72</td> </tr> </table>	1255.72																			
1255.72																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Ronald Cook	<b>Transaction ID:</b> SB21B.37552 <b>Date of Disbursement</b>																				
Mailing Address 1838 Powderhorn Ln.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	4		2	0	0	8												
City Katy State TX Zip Code 77493-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name	<table border="1"> <tr> <td colspan="10">550.50</td> </tr> </table>	550.50																			
550.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**2392.72**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 213 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Ronald Cook

Mailing Address 1838 Powderhorn Ln.

City  
Katy

State  
TX

Zip Code  
77493-0000

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37553

Date of Disbursement

07 / 15 / 2008

Amount of Each Disbursement this Period

190.00

B.

Full Name (Last, First, Middle Initial)

Ronald Cook

Mailing Address 1838 Powderhorn Ln.

City  
Katy

State  
TX

Zip Code  
77493-0000

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37554

Date of Disbursement

07 / 18 / 2008

Amount of Each Disbursement this Period

321.00

C.

Full Name (Last, First, Middle Initial)

Ronald Cook

Mailing Address 1838 Powderhorn Ln.

City  
Katy

State  
TX

Zip Code  
77493-0000

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37555

Date of Disbursement

07 / 23 / 2008

Amount of Each Disbursement this Period

919.00

SUBTOTAL of Disbursements This Page (optional) .....

1430.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 214 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Ronald Cook

Mailing Address 1838 Powderhorn Ln.

City  
Katy

State  
TX

Zip Code  
77493-0000

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37556

Date of Disbursement

07 / 28 / 2008

Amount of Each Disbursement this Period

1131.49

B.

Full Name (Last, First, Middle Initial)

Shane Cory

Mailing Address 325 Garrisonville Road  
Suite 106, PMB 101

City  
Stafford

State  
VA

Zip Code  
22554-0000

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37559

Date of Disbursement

07 / 25 / 2008

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

Andrew R Davis

Mailing Address 1639 Longleaf Dr.

City  
Myrtle Beach

State  
SC

Zip Code  
29575-5400

Purpose of Disbursement  
Employee Salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37560

Date of Disbursement

07 / 09 / 2008

Amount of Each Disbursement this Period

754.22

SUBTOTAL of Disbursements This Page (optional) .....

4385.71

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 215 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Andrew R Davis

Mailing Address 1639 Longleaf Dr.

City State Zip Code  
Myrtle Beach SC 29575-5400

Purpose of Disbursement

Employee Net Pay

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37561

Date of Disbursement

07 / 23 / 2008

Amount of Each Disbursement this Period

754.22

B.

Full Name (Last, First, Middle Initial)

Mike Davis

Mailing Address 65 Duval Rd.

City State Zip Code  
Winterhaven FL 33884-0000

Purpose of Disbursement

Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37562

Date of Disbursement

07 / 10 / 2008

Amount of Each Disbursement this Period

353.00

C.

Full Name (Last, First, Middle Initial)

Mike Davis

Mailing Address 65 Duval Rd.

City State Zip Code  
Winterhaven FL 33884-0000

Purpose of Disbursement

Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37563

Date of Disbursement

07 / 11 / 2008

Amount of Each Disbursement this Period

200.00

SUBTOTAL of Disbursements This Page (optional) .....

1307.22

TOTAL This Period (last page this line number only) .....

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

LIBERTARIAN NATIONAL COMMITTEE

155.00

2.97

19.29

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 217 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DC Office of Tax & Revenue

Mailing Address 941 North Capitol St, NE 6th Flr

City  
Washington

State  
DC

Zip Code  
20002-0000

Purpose of Disbursement  
DC - Admin. Funding Assessment

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.37657

Date of Disbursement

07 / 22 / 2008

Amount of Each Disbursement this Period

3.15

B.

Full Name (Last, First, Middle Initial)

DC Office of Tax & Revenue

Mailing Address 941 North Capitol St, NE 6th Flr

City  
Washington

State  
DC

Zip Code  
20002-0000

Purpose of Disbursement  
DC - Unemployment Company

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.37658

Date of Disbursement

07 / 22 / 2008

Amount of Each Disbursement this Period

20.46

C.

Full Name (Last, First, Middle Initial)

De Lage Landen Financial

Mailing Address PO Box 41601

City  
Philadelphia

State  
PA

Zip Code  
19101-1601

Purpose of Disbursement  
Copier Lease

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.37659

Date of Disbursement

07 / 03 / 2008

Amount of Each Disbursement this Period

498.88

SUBTOTAL of Disbursements This Page (optional) .....

522.49

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 218 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Susan M Dickson Mailing Address 3410 Vineland Place	<b>Transaction ID:</b> SB21B.37565 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 9 / 2 0 0 8</div> </div>
City Dumfries State VA Zip Code 22026-0000 Purpose of Disbursement Employee Net Pay Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>909.06</div> <div>001</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Susan M Dickson Mailing Address 3410 Vineland Place City Dumfries State VA Zip Code 22026-0000 Purpose of Disbursement Employee Net Pay Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> SB21B.37566 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 3 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>925.05</div> <div>001</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) DirectLine Technologies, Inc. Mailing Address 1600 N. Carpenter Rd. #D City Modesto State CA Zip Code 95351-1145 Purpose of Disbursement LNC Renewal Phonebank Program Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> SB21B.37660 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>5000.00</div> <div>001</div> Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) .....

**6834.11**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 219 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) DirectMail.com</p> <p>Mailing Address 5511 Ketch Road Attn: Beverly Kalbaugh</p> <p>City Prince Frederick State MD Zip Code 20678-0000</p> <p>Purpose of Disbursement Non Candidate Party Printing Serv</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.37661</p> <p><b>Date of Disbursement</b>  <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 7</div> <div>1 5</div> <div>2 0 0 8</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>2741.00</div> </p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Paula Edwards</p> <p>Mailing Address 1200 G Street, N.W. Suite 800</p> <p>City Washington State DC Zip Code 20005-0000</p> <p>Purpose of Disbursement Fec Filing and Amendments for 08</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.37567</p> <p><b>Date of Disbursement</b>  <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 7</div> <div>0 8</div> <div>2 0 0 8</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>1000.00</div> </p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Mike Ferguson</p> <p>Mailing Address 6201 E 149th St</p> <p>City Grandview State MO Zip Code 64030-4321</p> <p>Purpose of Disbursement Ballot Access Petitioning Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.37569</p> <p><b>Date of Disbursement</b>  <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>0 7</div> <div>2 8</div> <div>2 0 0 8</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>2500.00</div> </p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**6241.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 220 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit	<b>Transaction ID:</b> SB21B.37759 <b>Date of Disbursement</b>																				
Mailing Address PO Box 970030	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	8		2	0	0	8												
City State Zip Code St. Louis MO 63197-0030	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Federal Unemployment Candidate Name	<table border="1"> <tr> <td colspan="10">11.87</td> </tr> </table>	11.87																			
11.87																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type <table border="1"> <tr> <td>001</td> </tr> </table>	001																			
001																					
<b>B.</b> Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit	<b>Transaction ID:</b> SB21B.37760 <b>Date of Disbursement</b>																				
Mailing Address PO Box 970030	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	8		2	0	0	8												
City State Zip Code St. Louis MO 63197-0030	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Medicare Company Candidate Name	<table border="1"> <tr> <td colspan="10">162.08</td> </tr> </table>	162.08																			
162.08																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type <table border="1"> <tr> <td>001</td> </tr> </table>	001																			
001																					
<b>C.</b> Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit	<b>Transaction ID:</b> SB21B.37761 <b>Date of Disbursement</b>																				
Mailing Address PO Box 970030	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	8		2	0	0	8												
City State Zip Code St. Louis MO 63197-0030	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Medicare Employee Candidate Name	<table border="1"> <tr> <td colspan="10">162.08</td> </tr> </table>	162.08																			
162.08																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type <table border="1"> <tr> <td>001</td> </tr> </table>	001																			
001																					

**SUBTOTAL** of Disbursements This Page (optional) .....

**336.03**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 221 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code  
St. Louis MO 63197-0030

Purpose of Disbursement  
Social Security Company  
Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
State: District: ☐ Other (specify) ▼

Transaction ID: SB21B.37762

Date of Disbursement

07 / 08 / 2008

Amount of Each Disbursement this Period

668.82

**B.** Full Name (Last, First, Middle Initial)  
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code  
St. Louis MO 63197-0030

Purpose of Disbursement  
Social Security Employee  
Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
State: District: ☐ Other (specify) ▼

Transaction ID: SB21B.37763

Date of Disbursement

07 / 08 / 2008

Amount of Each Disbursement this Period

693.03

**C.** Full Name (Last, First, Middle Initial)  
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code  
St. Louis MO 63197-0030

Purpose of Disbursement  
Federal Withholding  
Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
State: District: ☐ Other (specify) ▼

Transaction ID: SB21B.37764

Date of Disbursement

07 / 08 / 2008

Amount of Each Disbursement this Period

1034.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2395.85

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 222 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code  
St. Louis MO 63197-0030

Purpose of Disbursement  
Federal Unemployment

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37765

Date of Disbursement

07 / 22 / 2008

Amount of Each Disbursement this Period

12.59

**B.** Full Name (Last, First, Middle Initial)  
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code  
St. Louis MO 63197-0030

Purpose of Disbursement  
Medicare Company

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37766

Date of Disbursement

07 / 22 / 2008

Amount of Each Disbursement this Period

163.38

**C.** Full Name (Last, First, Middle Initial)  
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code  
St. Louis MO 63197-0030

Purpose of Disbursement  
Medicare Employee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37767

Date of Disbursement

07 / 22 / 2008

Amount of Each Disbursement this Period

163.38

**SUBTOTAL** of Disbursements This Page (optional) .....

339.35

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 223 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit	<b>Transaction ID:</b> SB21B.37768 <b>Date of Disbursement</b>																				
Mailing Address PO Box 970030	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	2		2	0	0	8												
City State Zip Code St. Louis MO 63197-0030	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Social Security Company Candidate Name	<table border="1"> <tr> <td colspan="10">674.39</td> </tr> </table>	674.39																			
674.39																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit	<b>Transaction ID:</b> SB21B.37769 <b>Date of Disbursement</b>																				
Mailing Address PO Box 970030	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	2		2	0	0	8												
City State Zip Code St. Louis MO 63197-0030	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Social Security Employee Candidate Name	<table border="1"> <tr> <td colspan="10">698.60</td> </tr> </table>	698.60																			
698.60																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit	<b>Transaction ID:</b> SB21B.37770 <b>Date of Disbursement</b>																				
Mailing Address PO Box 970030	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	2		2	0	0	8												
City State Zip Code St. Louis MO 63197-0030	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Federal Withholding Candidate Name	<table border="1"> <tr> <td colspan="10">1034.00</td> </tr> </table>	1034.00																			
1034.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**2406.99**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 224 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Cheryl Forde

Mailing Address PO Box 56507

City  
Philadelphia

State  
PA

Zip Code  
19111-6507

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37570

Date of Disbursement

07 / 01 / 2008

Amount of Each Disbursement this Period

798.00

B.

Full Name (Last, First, Middle Initial)

Cheryl Forde

Mailing Address PO Box 56507

City  
Philadelphia

State  
PA

Zip Code  
19111-6507

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37571

Date of Disbursement

07 / 01 / 2008

Amount of Each Disbursement this Period

1056.00

C.

Full Name (Last, First, Middle Initial)

FP Mailing Solutions

Mailing Address Dept 4272

City  
Carol Stream

State  
IL

Zip Code  
60122-4272

Purpose of Disbursement  
EOM Postage & Meter Resets

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37662

Date of Disbursement

07 / 31 / 2008

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional) .....

3354.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 225 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Freedom Petition Management, Inc.

Mailing Address 25 Cobblestone Ln.

City  
Worcester

State  
MA

Zip Code  
01606-0000

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.37663

Date of Disbursement

07 / 03 / 2008

Amount of Each Disbursement this Period

5180.00

B.

Full Name (Last, First, Middle Initial)

Great American Leasing

Mailing Address 8742 INNOVATION WAY

City  
CHICAGO

State  
IL

Zip Code  
60682-0087

Purpose of Disbursement  
Postage Meter Lease

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.37666

Date of Disbursement

07 / 03 / 2008

Amount of Each Disbursement this Period

164.71

C.

Full Name (Last, First, Middle Initial)

Great American Leasing

Mailing Address 8742 INNOVATION WAY

City  
CHICAGO

State  
IL

Zip Code  
60682-0087

Purpose of Disbursement  
Postage Meter Lease

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.37667

Date of Disbursement

07 / 23 / 2008

Amount of Each Disbursement this Period

164.71

SUBTOTAL of Disbursements This Page (optional) .....

5509.42

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 226 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bruce Hartgers</p> <p>Mailing Address 563 Eagle Dr. c/of Dedrianne Hartgers</p> <p>City Alomogordo State NM Zip Code 88310-7724</p> <p>Purpose of Disbursement Ballot Access Petitioning Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.37574</p> <p><b>Date of Disbursement</b>  <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 8</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>100.00</div> </p> <p><b>Category/Type</b>  <div>001</div> </p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Sean N Haugh</p> <p>Mailing Address 1821 Hillandale Road #1B-322</p> <p>City Durham State NC Zip Code 27705-0000</p> <p>Purpose of Disbursement Employee Net Pay</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.37575</p> <p><b>Date of Disbursement</b>  <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 9 / 2 0 0 8</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>1195.21</div> </p> <p><b>Category/Type</b>  <div>001</div> </p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Sean N Haugh</p> <p>Mailing Address 1821 Hillandale Road #1B-322</p> <p>City Durham State NC Zip Code 27705-0000</p> <p>Purpose of Disbursement Employee Net Pay</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.37576</p> <p><b>Date of Disbursement</b>  <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 3 / 2 0 0 8</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div>1195.22</div> </p> <p><b>Category/Type</b>  <div>001</div> </p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**2490.43**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 227 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Hickey, Michael P. & Associates

Mailing Address 9522 Nassington Ct.

City Richmond State VA Zip Code 23229-6057

Purpose of Disbursement  
Writing for Non Candidate Mailing

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.37668

Date of Disbursement

07 / 15 / 2008

Amount of Each Disbursement this Period

3000.00

**B.** Full Name (Last, First, Middle Initial)  
Independent Party of CT c/of M. Telesca

Mailing Address 154 Bunker Hill Ave

City Waterbury State CT Zip Code 06708-2226

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.37672

Date of Disbursement

07 / 23 / 2008

Amount of Each Disbursement this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
InTown SuitesMailing Address 2727 Paces Ferry Road  
Suite 2-1200

City Atlanta State GA Zip Code 30339-0000

Purpose of Disbursement  
Employee Travel - hotel

Candidate Name

002  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.37673

Date of Disbursement

07 / 15 / 2008

Amount of Each Disbursement this Period

689.67

SUBTOTAL of Disbursements This Page (optional) .....

8689.67

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 228 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) InTown Suites	<b>Transaction ID:</b> SB21B.37674 <b>Date of Disbursement</b>																				
Mailing Address 2727 Paces Ferry Road Suite 2-1200	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	1		2	0	0	8												
City Atlanta State GA Zip Code 30339-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Employee Travel - hotel Candidate Name	<table border="1"> <tr> <td>4</td><td>7</td><td>9</td><td>.</td><td>5</td><td>3</td> </tr> </table>	4	7	9	.	5	3														
4	7	9	.	5	3																
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<table border="1"> <tr> <td>002</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	002	Category/ Type																		
002																					
Category/ Type																					
<b>B.</b> Full Name (Last, First, Middle Initial) David Jackson	<b>Transaction ID:</b> SB21B.37578 <b>Date of Disbursement</b>																				
Mailing Address 3005 N. Robinson Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	1		2	0	0	8												
City Oklahoma City State OK Zip Code 73103-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name	<table border="1"> <tr> <td>3</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	3	0	0	.	0	0														
3	0	0	.	0	0																
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<table border="1"> <tr> <td>001</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	001	Category/ Type																		
001																					
Category/ Type																					
<b>C.</b> Full Name (Last, First, Middle Initial) David Jackson	<b>Transaction ID:</b> SB21B.37579 <b>Date of Disbursement</b>																				
Mailing Address 3005 N. Robinson Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	8		2	0	0	8												
City Oklahoma City State OK Zip Code 73103-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name	<table border="1"> <tr> <td>4</td><td>5</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	4	5	0	.	0	0														
4	5	0	.	0	0																
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<table border="1"> <tr> <td>001</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	001	Category/ Type																		
001																					
Category/ Type																					

**SUBTOTAL** of Disbursements This Page (optional) .....

**1229.53**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 229 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) David Jackson	<b>Transaction ID:</b> SB21B.37580 <b>Date of Disbursement</b>
Mailing Address 3005 N. Robinson Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 2 / 2 0 0 8</div> </div>
<div> <div>City Oklahoma City State OK Zip Code 73103-0000</div> <div>           Purpose of Disbursement            Ballot Access Petitioning Expense            Candidate Name         </div> <div>001 Category/Type</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>857.50</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>State: District:</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> </div>	
<b>B.</b> Full Name (Last, First, Middle Initial) David Jackson	<b>Transaction ID:</b> SB21B.37581 <b>Date of Disbursement</b>
Mailing Address 3005 N. Robinson Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 0 8</div> </div>
<div> <div>City Oklahoma City State OK Zip Code 73103-0000</div> <div>           Purpose of Disbursement            Ballot Access Petitioning Expense            Candidate Name         </div> <div>001 Category/Type</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>429.00</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>State: District:</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> </div>	
<b>C.</b> Full Name (Last, First, Middle Initial) David Jackson	<b>Transaction ID:</b> SB21B.37582 <b>Date of Disbursement</b>
Mailing Address 3005 N. Robinson Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 8</div> </div>
<div> <div>City Oklahoma City State OK Zip Code 73103-0000</div> <div>           Purpose of Disbursement            Ballot Access Petitioning Expense            Candidate Name         </div> <div>001 Category/Type</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>574.02</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>State: District:</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> </div>	

**SUBTOTAL** of Disbursements This Page (optional) .....

**1860.52**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 230 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Joe Ragan's

Mailing Address PO Box 125

City  
Springfield

State  
VA

Zip Code  
22150-0125

Purpose of Disbursement  
Office Supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.37675

Date of Disbursement

07 / 03 / 2008

Amount of Each Disbursement this Period

178.01

**B.**

Full Name (Last, First, Middle Initial)

Joe Ragan's

Mailing Address PO Box 125

City  
Springfield

State  
VA

Zip Code  
22150-0125

Purpose of Disbursement  
Office Supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.37676

Date of Disbursement

07 / 31 / 2008

Amount of Each Disbursement this Period

423.93

**C.**

Full Name (Last, First, Middle Initial)

Kraig Keesling

Mailing Address 605 S. Prairie

City  
Sioux Falls

State  
SD

Zip Code  
57104-0000

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.37586

Date of Disbursement

07 / 14 / 2008

Amount of Each Disbursement this Period

388.50

**SUBTOTAL** of Disbursements This Page (optional) .....

990.44

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 231 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

John Kennedy

Mailing Address 8492 Shuman Ln.

City  
Cincinnati

State  
OH

Zip Code  
45231-0000

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.37588

Date of Disbursement

07 / 07 / 2008

Amount of Each Disbursement this Period

288.00

**B.**

Full Name (Last, First, Middle Initial)

John Kennedy

Mailing Address 8492 Shuman Ln.

City  
Cincinnati

State  
OH

Zip Code  
45231-0000

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.37589

Date of Disbursement

07 / 23 / 2008

Amount of Each Disbursement this Period

109.50

**C.**

Full Name (Last, First, Middle Initial)

Scott A Kohlhaas

Mailing Address 6701 East 6th Ave Apt 24

City  
Anchorage

State  
AK

Zip Code  
99504-0000

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.37590

Date of Disbursement

07 / 01 / 2008

Amount of Each Disbursement this Period

4000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4397.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 232 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Robert S Kraus

Transaction ID: SB21B.37591

Date of Disbursement

07 / 09 / 2008

Mailing Address 5375 Duke Street  
Apt 905

City Alexandria State VA Zip Code 22304-0000

Amount of Each Disbursement this Period

1395.56

Purpose of Disbursement

Employee Net Pay

001

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

Robert S Kraus

Transaction ID: SB21B.37592

Date of Disbursement

07 / 23 / 2008

Mailing Address 5375 Duke Street  
Apt 905

City Alexandria State VA Zip Code 22304-0000

Amount of Each Disbursement this Period

1395.55

Purpose of Disbursement

Employee Net Pay

001

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)

Dallas Krausch

Transaction ID: SB21B.37595

Date of Disbursement

07 / 08 / 2008

Mailing Address 1903 Crus Dr.

City Rapid City State SD Zip Code 57702-0000

Amount of Each Disbursement this Period

300.00

Purpose of Disbursement

Ballot Access Petitioning Expense

001

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) .....

3091.11

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 233 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Dallas Krausch Mailing Address 1903 Crus Dr.	<b>Transaction ID:</b> SB21B.37596 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 8</div> </div>
City State Zip Code Rapid City SD 57702-0000 Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>396.00</div> <div>001</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Alexa R Lamoureux Mailing Address 1224 Powhatan St.	<b>Transaction ID:</b> SB21B.37597 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 9 / 2 0 0 8</div> </div>
City State Zip Code Alexandria VA 22314-1306 Purpose of Disbursement Employee Net Pay Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>576.90</div> <div>001</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Alexa R Lamoureux Mailing Address 1224 Powhatan St.	<b>Transaction ID:</b> SB21B.37598 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 3 / 2 0 0 8</div> </div>
City State Zip Code Alexandria VA 22314-1306 Purpose of Disbursement Employee Net Pay Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>535.48</div> <div>001</div> Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) .....

**1508.38**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 234 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) John Laws	<b>Transaction ID:</b> SB21B.37600 <b>Date of Disbursement</b>																				
Mailing Address 4405 Tranquility Ln.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	0		2	0	0	8												
City Lorian State OH Zip Code 44053-0000	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name	<table border="1"> <tr> <td colspan="10">375.00</td> </tr> </table>	375.00																			
375.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 001																					
<b>B.</b> Full Name (Last, First, Middle Initial) MacBain Printing Co. Inc.	<b>Transaction ID:</b> SB21B.37677 <b>Date of Disbursement</b>																				
Mailing Address 1301-B Governor Ct.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	5		2	0	0	8												
City Abington State MD Zip Code 21009-0000	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Non Candidate Party Printing Serv Candidate Name	<table border="1"> <tr> <td colspan="10">1669.00</td> </tr> </table>	1669.00																			
1669.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 003																					
<b>C.</b> Full Name (Last, First, Middle Initial) MAMSI - UnitedHealth (WFG)	<b>Transaction ID:</b> SB21B.37678 <b>Date of Disbursement</b>																				
Mailing Address PO Box 42924	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	3		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	3		2	0	0	8												
City Philadelphia State PA Zip Code 19101-2924	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Employee Health & Dental Candidate Name	<table border="1"> <tr> <td colspan="10">838.75</td> </tr> </table>	838.75																			
838.75																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 001																					

**SUBTOTAL** of Disbursements This Page (optional) .....

2882.75

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 235 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) William McGill	<b>Transaction ID:</b> SB21B.37602 <b>Date of Disbursement</b>
Mailing Address 4906 W. Chicago St.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 6 / 2 0 0 8</div> </div>
City Rapid City State SD Zip Code 57702-1828	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name	<div> <div>2618.78</div> <div>001</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) William McGill	<b>Transaction ID:</b> SB21B.37603 <b>Date of Disbursement</b>
Mailing Address 4906 W. Chicago St.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 3 / 2 0 0 8</div> </div>
City Rapid City State SD Zip Code 57702-1828	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name	<div> <div>850.50</div> <div>001</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) William McGill	<b>Transaction ID:</b> SB21B.37604 <b>Date of Disbursement</b>
Mailing Address 4906 W. Chicago St.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 0 8</div> </div>
City Rapid City State SD Zip Code 57702-1828	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name	<div> <div>283.50</div> <div>001</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

3752.78

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 236 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) William McGill	<b>Transaction ID:</b> SB21B.37605 <b>Date of Disbursement</b>
Mailing Address 4906 W. Chicago St.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 8</div> </div>
City State Zip Code Rapid City SD 57702-1828	<b>Amount of Each Disbursement this Period</b> <div>568.97</div>
Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name	<div>001</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Mark J. Meranta	<b>Transaction ID:</b> SB21B.37606 <b>Date of Disbursement</b>
Mailing Address 5883 Anthony Dr.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 9 / 2 0 0 8</div> </div>
City State Zip Code Woodbridge VA 22193-0000	<b>Amount of Each Disbursement this Period</b> <div>503.61</div>
Purpose of Disbursement Employee Net Pay Candidate Name	<div>001</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Mark J. Meranta	<b>Transaction ID:</b> SB21B.37607 <b>Date of Disbursement</b>
Mailing Address 5883 Anthony Dr.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 3 / 2 0 0 8</div> </div>
City State Zip Code Woodbridge VA 22193-0000	<b>Amount of Each Disbursement this Period</b> <div>642.75</div>
Purpose of Disbursement Employee Net Pay Candidate Name	<div>001</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

1715.33

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 237 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Merchant Services	<b>Transaction ID:</b> SB21B.37679 <b>Date of Disbursement</b>
Mailing Address 890 Mountain Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 8</div> </div>
City New Providence State NJ Zip Code 07974-0000	<b>Amount of Each Disbursement this Period</b> <div>1706.27</div>
Purpose of Disbursement Credit Card Processing Fee Candidate Name	<div>001</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) METRO c/of CommuterDirect	<b>Transaction ID:</b> SB21B.37680 <b>Date of Disbursement</b>
Mailing Address PO Box 12176	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 8</div> </div>
City Arlington State VA Zip Code 22219-2176	<b>Amount of Each Disbursement this Period</b> <div>414.95</div>
Purpose of Disbursement Employee Metrocheck Passes and Fees Candidate Name	<div>001</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) National Electronic Type, Inc	<b>Transaction ID:</b> SB21B.37681 <b>Date of Disbursement</b>
Mailing Address 2320 S. Kansas Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 8</div> </div>
City Topeka State KS Zip Code 66611-0000	<b>Amount of Each Disbursement this Period</b> <div>112.50</div>
Purpose of Disbursement Non Cand. Party Outreach Materials Candidate Name	<div>001</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

2233.72

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 238 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

National Electronic Type, Inc

Mailing Address 2320 S. Kansas Ave

City  
TopekaState  
KSZip Code  
66611-0000Purpose of Disbursement  
Non Cand. Party Outreach Materials

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.37682

Date of Disbursement

07 / 31 / 2008

Amount of Each Disbursement this Period

225.00

**B.**

Full Name (Last, First, Middle Initial)

North Carolina Department of Revenue

Mailing Address P.O. Box 25000

City  
RaleighState  
NCZip Code  
27640-0640Purpose of Disbursement  
NC - Withholding

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.37683

Date of Disbursement

07 / 08 / 2008

Amount of Each Disbursement this Period

61.00

**C.**

Full Name (Last, First, Middle Initial)

North Carolina Department of Revenue

Mailing Address P.O. Box 25000

City  
RaleighState  
NCZip Code  
27640-0640Purpose of Disbursement  
NC - Withholding

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.37684

Date of Disbursement

07 / 22 / 2008

Amount of Each Disbursement this Period

61.00

SUBTOTAL of Disbursements This Page (optional) .....

347.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 239 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) PayPal Merchant Services	<b>Transaction ID:</b> SB21B.37685 <b>Date of Disbursement</b>
Mailing Address 2211 N. First St.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 8</div> </div>
City San Jose State CA Zip Code 95131-0000	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Credit Card Processing Fee Candidate Name	<div> <div>1958.07</div> <div>001 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Austin W Petersen	<b>Transaction ID:</b> SB21B.37609 <b>Date of Disbursement</b>
Mailing Address 309 N. Jordan St. Apt 102	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 9 / 2 0 0 8</div> </div>
City Alexandria State VA Zip Code 22304-0000	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Employee Net Pay Candidate Name	<div> <div>1324.84</div> <div>001 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Austin W Petersen	<b>Transaction ID:</b> SB21B.37608 <b>Date of Disbursement</b>
Mailing Address 309 N. Jordan St. Apt 102	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 8</div> </div>
City Alexandria State VA Zip Code 22304-0000	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Expense Reimbursement-See Attached Memo Candidate Name	<div> <div>53.19</div> <div>001 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**3336.10**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 240 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Safeway			Transaction ID: SB21B.37608.0 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 5 / 2 0 0 8	
	Mailing Address 2550 Virginia Ave NW			Amount of Each Disbursement this Period 53.19  [MEMO ITEM]	
	City Washington	State DC	Zip Code 20037-0000		
	Purpose of Disbursement Break Room Supplies	001 Category/ Type			
	Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					
<b>B.</b>	Full Name (Last, First, Middle Initial) Austin W Petersen			Transaction ID: SB21B.37610 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 0 8	
	Mailing Address 309 N. Jordan St. Apt 102			Amount of Each Disbursement this Period 1284.08	
	City Alexandria	State VA	Zip Code 22304-0000		
	Purpose of Disbursement Employee Net Pay	001 Category/ Type			
	Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					
<b>C.</b>	Full Name (Last, First, Middle Initial) Mark Pickens			Transaction ID: SB21B.37775 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 0 8	
	Mailing Address 167 Noterdame Ave 2nd Fl			Amount of Each Disbursement this Period 8525.89	
	City Manchester	State NH	Zip Code 03132-3941		
	Purpose of Disbursement Ballot Access Petitioning Expense	001 Category/ Type			
	Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					

SUBTOTAL of Disbursements This Page (optional) .....

9809.97

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 241 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Karen E. Pierce

Mailing Address 200 W. 34th Ave. #587

City  
Anchorage

State  
AK

Zip Code  
99503-0000

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37612

Date of Disbursement

07 / 03 / 2008

Amount of Each Disbursement this Period

1437.00

B.

Full Name (Last, First, Middle Initial)

Karen E. Pierce

Mailing Address 200 W. 34th Ave. #587

City  
Anchorage

State  
AK

Zip Code  
99503-0000

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37613

Date of Disbursement

07 / 23 / 2008

Amount of Each Disbursement this Period

508.50

C.

Full Name (Last, First, Middle Initial)

Karen E. Pierce

Mailing Address 200 W. 34th Ave. #587

City  
Anchorage

State  
AK

Zip Code  
99503-0000

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37614

Date of Disbursement

07 / 28 / 2008

Amount of Each Disbursement this Period

538.50

SUBTOTAL of Disbursements This Page (optional) .....

2484.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 242 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Karen E. Pierce Mailing Address 200 W. 34th Ave. #587	<b>Transaction ID:</b> SB21B.37615 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 8</div> </div>
City Anchorage State AK Zip Code 99503-0000 Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>142.50</div> <div>001</div> Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) PNC - Riggs Bank Mailing Address 2600 Virginia Ave NW City Washington State DC Zip Code 20037-0000 Purpose of Disbursement Bank Service Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.37688 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>39.28</div> <div>001</div> Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) PNC Master Card Mailing Address PO Box 790350 City St. Louis State MO Zip Code 63179-0350 Purpose of Disbursement Credit Card Payment(See Attached Memos) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.37689 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>11718.64</div> <div>001</div> Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) .....

**11900.42**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 243 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Accurint Mailing Address P.O. Box 538358	<b>Transaction ID:</b> SB21B.37689.0 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 2 / 2 0 0 8</div> </div>
City Atlanta State GA Zip Code 30353-8358 Purpose of Disbursement Address and Phone Verification Services Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>168.78</div> <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Central Parking System Mailing Address PO Box 790402 Attn: Monthly Accts Dept. City St. Louis State MO Zip Code 63179-0402 Purpose of Disbursement Parking Garage Rental Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> SB21B.37689.1 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>240.00</div> <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Choice Hotels Group, Inc. Mailing Address 10750 Columbia Pike City Silver Spring State MD Zip Code 20901-0000 Purpose of Disbursement Staff Travel-Hotel Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> SB21B.37689.3 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>528.61</div> <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 244 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
Continental Airlines, Inc.

Mailing Address P.O. Box 4607

City Houston State TX Zip Code 77210-4607

Purpose of Disbursement  
Staff Travel-Air

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37689.4

Date of Disbursement

07 / 22 / 2008

Amount of Each Disbursement this Period

532.90

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)  
Corporate & Leisure

Mailing Address 2700 W. Cyprus Creek Road  
Suite D-105

City Ft Lauderdale State FL Zip Code 33309-0000

Purpose of Disbursement  
Staff Travel-Air

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37689.5

Date of Disbursement

07 / 22 / 2008

Amount of Each Disbursement this Period

65.99

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
Days Inns Worldwide, Inc.

Mailing Address 1 Sylvan Way

City Parsippany State NJ Zip Code 07054-0000

Purpose of Disbursement  
Staff Travel-Hotel

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37689.7

Date of Disbursement

07 / 22 / 2008

Amount of Each Disbursement this Period

529.13

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 245 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) DELTA AIRLINES Mailing Address ATLANTA AIRPORT	<b>Transaction ID:</b> SB21B.37689.8 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 2 / 2 0 0 8</div> </div>
City ATLANTA State GA Zip Code 30320-0000 Purpose of Disbursement Staff Travel-Air Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>743.00</div> <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) GoToMyPC.com Mailing Address 5385 Hollister Ave #111 City Santa barbara State CA Zip Code 93111-0000 Purpose of Disbursement PC Remote Access Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.37689.9 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>44.94</div> <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Home Everything Mailing Address 1202 Lexington Avenue Suite 1000 City New York State NY Zip Code 10028-0000 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.37689.10 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>215.00</div> <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 246 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) JetBlue Mailing Address 118-29 Queens Blvd	<b>Transaction ID:</b> SB21B.37689.11 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 2 / 2 0 0 8</div> </div>
City Forest Hills State NY Zip Code 11375-0000 Purpose of Disbursement Staff Travel-Air Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>658.50</div> <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) La Quinta Inn Mailing Address 7931 Daetwyler Dr. City Orlando State FL Zip Code 32812-0000 Purpose of Disbursement Staff Travel-Hotel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.37689.13 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>215.53</div> <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Lyris Tech - Sparklist Mailing Address PO Box 49023 City San Jose State CA Zip Code 95161-9023 Purpose of Disbursement Email List Hosting Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.37689.14 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>3000.00</div> <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 247 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Postmaster

Mailing Address US Post Office Watergate  
2500 virginia Ave NW

City Washington State DC Zip Code 20037-0000

Purpose of Disbursement

Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37689.17

Date of Disbursement

07 / 22 / 2008

Amount of Each Disbursement this Period

7.75

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Rackspace US Inc.

Mailing Address 9725 Datapoint Dr. #100

City San Antonio State TX Zip Code 78229-0000

Purpose of Disbursement

Website Hosting Service

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37689.18

Date of Disbursement

07 / 22 / 2008

Amount of Each Disbursement this Period

649.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Southwest Airlines

Mailing Address PO Box 36662

City Dallas State TX Zip Code 75235-0000

Purpose of Disbursement

Staff Travel-Air

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37689.19

Date of Disbursement

07 / 22 / 2008

Amount of Each Disbursement this Period

601.50

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 248 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Time Warner Inc.	<b>Transaction ID:</b> SB21B.37689.20 <b>Date of Disbursement</b>																				
Mailing Address 1271 Avenue of the Americas office Room 7-439	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	2		2	0	0	8												
City New York State NY Zip Code 10020-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Republishing Rights for Party Mailing Candidate Name	<table border="1"> <tr> <td colspan="10">560.00</td> </tr> </table>	560.00																			
560.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) USAirways	<b>Transaction ID:</b> SB21B.37689.21 <b>Date of Disbursement</b>																				
Mailing Address 2345 Crystal Dr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	2		2	0	0	8												
City Arlington State VA Zip Code 22227-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Staff Travel-Air Candidate Name	<table border="1"> <tr> <td colspan="10">2604.05</td> </tr> </table>	2604.05																			
2604.05																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) PNC Master Card	<b>Transaction ID:</b> SB21B.37722 <b>Date of Disbursement</b>																				
Mailing Address PO Box 790350	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	1		2	0	0	8												
City St. Louis State MO Zip Code 63179-0350	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Payment(See Attached Memo) Candidate Name	<table border="1"> <tr> <td colspan="10">6705.23</td> </tr> </table>	6705.23																			
6705.23																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

6705.23

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 249 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Choice Hotels Group, Inc.	<b>Transaction ID:</b> SB21B.37722.0 <b>Date of Disbursement</b>
Mailing Address 10750 Columbia Pike	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>07 / 31 / 2008</div> </div>
City Silver Spring State MD Zip Code 20901-0000	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Staff Travel-Hotel	<div>1659.07</div>
Candidate Name	<div>002</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Days Inns Worldwide, Inc.	<b>Transaction ID:</b> SB21B.37722.2 <b>Date of Disbursement</b>
Mailing Address 1 Sylvan Way	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>07 / 31 / 2008</div> </div>
City Parsippany State NJ Zip Code 07054-0000	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Staff Travel-Hotel	<div>1361.62</div>
Candidate Name	<div>002</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) DELTA AIRLINES	<b>Transaction ID:</b> SB21B.37722.3 <b>Date of Disbursement</b>
Mailing Address ATLANTA AIRPORT	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>07 / 31 / 2008</div> </div>
City ATLANTA State GA Zip Code 30320-0000	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Staff Travel-Air	<div>1242.00</div>
Candidate Name	<div>002</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 250 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Google Ad Works	<b>Transaction ID:</b> SB21B.37722.4 <b>Date of Disbursement</b>
Mailing Address 1600 Amphitheatre Prky	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 8</div> </div>
City Mt. View State CA Zip Code 94043-1351	<b>Amount of Each Disbursement this Period</b> <div>89.34</div>
Purpose of Disbursement LP Branding Project Candidate Name	<div>001</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Postmaster	<b>Transaction ID:</b> SB21B.37722.6 <b>Date of Disbursement</b>
Mailing Address US Post Office Watergate 2500 virginia Ave NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20037-0000	<b>Amount of Each Disbursement this Period</b> <div>58.75</div>
Purpose of Disbursement Postage Candidate Name	<div>001</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) ThePlanet.com	<b>Transaction ID:</b> SB21B.37722.7 <b>Date of Disbursement</b>
Mailing Address 1333 N. Stemmons Fwy #110	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 8</div> </div>
City Dallas State TX Zip Code 75207-3724	<b>Amount of Each Disbursement this Period</b> <div>574.00</div>
Purpose of Disbursement Web Hosting Server Candidate Name	<div>001</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 251 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) United Airlines Mailing Address PO Box 86100	<b>Transaction ID:</b> SB21B.37722.8 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 8</div> </div>
City Chicago State IL Zip Code 60666-0100 Purpose of Disbursement Staff Travel-Air Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>592.50</div> <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) USAirways Mailing Address 2345 Crystal Dr City Arlington State VA Zip Code 22227-0000 Purpose of Disbursement Staff Travel-Air Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.37722.9 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1043.00</div> <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Roger Pope Mailing Address 8526 Northmont Dr. City San Antonio State TX Zip Code 78239-0000 Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.37616 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>250.49</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

250.49

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 252 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Roger Pope	<b>Transaction ID:</b> SB21B.37617 <b>Date of Disbursement</b>
Mailing Address 8526 Northmont Dr.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 8</div> </div>
City San Antonio State TX Zip Code 78239-0000 Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>10.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type: 001	
<b>B.</b> Full Name (Last, First, Middle Initial) Postmaster	<b>Transaction ID:</b> SB21B.37733 <b>Date of Disbursement</b>
Mailing Address US Post Office Watergate 2500 virginia Ave NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 8 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20037-0000 Purpose of Disbursement Postage Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type: 001	
<b>C.</b> Full Name (Last, First, Middle Initial) Postmaster - Walton Press	<b>Transaction ID:</b> SB21B.37734 <b>Date of Disbursement</b>
Mailing Address Walton Press 402 Mavfield Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 3 / 2 0 0 8</div> </div>
City Monroe State GA Zip Code 30655-0000 Purpose of Disbursement Postage for Non Candidate Party Mailing Candidate Name	<b>Amount of Each Disbursement this Period</b> <div>4145.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type: 001	

**SUBTOTAL** of Disbursements This Page (optional) .....

5155.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 253 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) QuickBooks Payroll Service Mailing Address PO Box 30015	<b>Transaction ID:</b> SB21B.37735 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 8 / 2 0 0 8</div> </div>
City Reno State NV Zip Code 89520-3015 Purpose of Disbursement Payroll Processing Fees Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>117.38</div>
<b>B.</b> Full Name (Last, First, Middle Initial) QuickBooks Payroll Service Mailing Address PO Box 30015 City Reno State NV Zip Code 89520-3015 Purpose of Disbursement Payroll Processing Fees Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> SB21B.37736 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>20.62</div>
<b>C.</b> Full Name (Last, First, Middle Initial) William Redpath Mailing Address 827 Anthony Ct SE City Leesburg State VA Zip Code 20175-0000 Purpose of Disbursement Travel Reimbursement - See Attached Memo Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> SB21B.37619 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 8 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>373.17</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

511.17

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 254 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Gumbo's Denver

Mailing Address 1530 16th St # 103

City State Zip Code  
Denver CO 80202-0000

Purpose of Disbursement  
Staff Travel-Meals

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37619.0

Date of Disbursement

07 / 08 / 2008

Amount of Each Disbursement this Period

373.17

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)

Kurt W. Rice

Mailing Address 7801 S. Drexel Ave.

City State Zip Code  
Chicago IL 60619-0000

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37620

Date of Disbursement

07 / 08 / 2008

Amount of Each Disbursement this Period

381.28

**C.**

Full Name (Last, First, Middle Initial)

Kurt W. Rice

Mailing Address 7801 S. Drexel Ave.

City State Zip Code  
Chicago IL 60619-0000

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37621

Date of Disbursement

07 / 23 / 2008

Amount of Each Disbursement this Period

2414.42

**SUBTOTAL** of Disbursements This Page (optional) .....

2795.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 255 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b>	<p>Full Name (Last, First, Middle Initial) Kurt W. Rice</p> <p>Mailing Address 7801 S. Drexel Ave.</p> <p>City Chicago State IL Zip Code 60619-0000</p> <p>Purpose of Disbursement Ballot Access Petitioning Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.37622</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="658.20"/></p>
<b>B.</b>	<p>Full Name (Last, First, Middle Initial) Eric D. Rittberg</p> <p>Mailing Address 6 Chuckwagon Ct.</p> <p>City Angleton State TX Zip Code 77515-0000</p> <p>Purpose of Disbursement Ballot Access Petitioning Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.37623</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1380.02"/></p>
<b>C.</b>	<p>Full Name (Last, First, Middle Initial) Eric D. Rittberg</p> <p>Mailing Address 6 Chuckwagon Ct.</p> <p>City Angleton State TX Zip Code 77515-0000</p> <p>Purpose of Disbursement Ballot Access Petitioning Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.37624</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1114.99"/></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**3153.21**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 256 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Eric D. Rittberg Mailing Address 6 Chuckwagon Ct.	<b>Transaction ID:</b> SB21B.37625 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 3 / 2 0 0 8</div> </div>
City Angleton State TX Zip Code 77515-0000 Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>693.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Eric D. Rittberg Mailing Address 6 Chuckwagon Ct.	<b>Transaction ID:</b> SB21B.37626 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 0 8</div> </div>
City Angleton State TX Zip Code 77515-0000 Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>806.50</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Gary Sinawski Mailing Address 180 Montage St. #26F	<b>Transaction ID:</b> SB21B.37627 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 0 8</div> </div>
City Brooklyn State NY Zip Code 11201-3623 Purpose of Disbursement Legal Expenses Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>3500.00</div>
<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<div>4999.50</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<div></div>

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 257 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Gary Sinawski

Mailing Address 180 Montage St. #26F

City State Zip Code  
Brooklyn NY 11201-3623

Purpose of Disbursement  
Legal Expenses

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.37628

Date of Disbursement

07 / 23 / 2008

Amount of Each Disbursement this Period

281.00

**B.**

Full Name (Last, First, Middle Initial)

South Carolina Dept. of Revenue

Mailing Address c/of Withholding

City State Zip Code  
Columbia SC 29214-0004

Purpose of Disbursement  
SC - Withholding

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.37739

Date of Disbursement

07 / 08 / 2008

Amount of Each Disbursement this Period

62.72

**C.**

Full Name (Last, First, Middle Initial)

South Carolina Dept. of Revenue

Mailing Address c/of Withholding

City State Zip Code  
Columbia SC 29214-0004

Purpose of Disbursement  
SC - Withholding

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.37740

Date of Disbursement

07 / 22 / 2008

Amount of Each Disbursement this Period

62.72

**SUBTOTAL** of Disbursements This Page (optional) .....

406.44

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 258 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Star Envelope

Mailing Address PO box 740209, Dept. 40008

City Atlanta	State GA	Zip Code 30374-0209
-----------------	-------------	------------------------

Purpose of Disbursement  
Non Candidate Party Printing Serv

Candidate Name

003
Category/ Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37742

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	0	8

Amount of Each Disbursement this Period

6125.00
---------

**B.**

Full Name (Last, First, Middle Initial)

Erin K. Taylor

Mailing Address 339 Land's Mill

City Marietta	State GA	Zip Code 30067-0000
------------------	-------------	------------------------

Purpose of Disbursement  
Employee Net Pay

Candidate Name

001
Category/ Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37629

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	0	8

Amount of Each Disbursement this Period

269.87
--------

**C.**

Full Name (Last, First, Middle Initial)

Erin K. Taylor

Mailing Address 339 Land's Mill

City Marietta	State GA	Zip Code 30067-0000
------------------	-------------	------------------------

Purpose of Disbursement  
Employee Net Pay

Candidate Name

001
Category/ Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37630

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	0	8

Amount of Each Disbursement this Period

258.64
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SUBTOTAL of Disbursements This Page (optional) .....

6653.51

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 259 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Tekno Solutions</p> <p>Mailing Address c/of Patrick Kelly 3917 Holliday Rd</p> <p>City Dallas State TX Zip Code 75224-0000</p> <p>Purpose of Disbursement Ballot Access Petitioning Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.37743</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 3 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 3080.00</p> <p>001 Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Tekno Solutions</p> <p>Mailing Address c/of Patrick Kelly 3917 Holliday Rd</p> <p>City Dallas State TX Zip Code 75224-0000</p> <p>Purpose of Disbursement Ballot Access Petitioning Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.37744</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 0 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 232.34</p> <p>001 Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Tekno Solutions</p> <p>Mailing Address c/of Patrick Kelly 3917 Holliday Rd</p> <p>City Dallas State TX Zip Code 75224-0000</p> <p>Purpose of Disbursement Ballot Access Petitioning Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.37745</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 7858.76</p> <p>001 Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

11171.10

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 260 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Tekno Solutions

Mailing Address c/of Patrick Kelly  
3917 Holliday Rd

City Dallas State TX Zip Code 75224-0000

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District: Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37746

Date of Disbursement

07 / 23 / 2008

Amount of Each Disbursement this Period

7388.70

**B.**

Full Name (Last, First, Middle Initial)

Telecompute Corporation

Mailing Address P.O. Box 106019

City Atlanta State GA Zip Code 30348-6019

Purpose of Disbursement  
Phone and Data Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District: Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37747

Date of Disbursement

07 / 01 / 2008

Amount of Each Disbursement this Period

88.83

**C.**

Full Name (Last, First, Middle Initial)

Terra Eclipse, Inc.

Mailing Address 9043 Soquel Dr.

City Aptos State CA Zip Code 95003-0000

Purpose of Disbursement  
Website Management

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District: Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37748

Date of Disbursement

07 / 15 / 2008

Amount of Each Disbursement this Period

3928.50

**SUBTOTAL** of Disbursements This Page (optional) .....

11406.03

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 261 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Arenza Thigpen Mailing Address 601 N. Klevin, Apt. 2	<b>Transaction ID:</b> SB21B.37631 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 7 / 2 0 0 8</div> </div>
City Anchorage State AK Zip Code 99508-0000 Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>496.78</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Arenza Thigpen Mailing Address 601 N. Klevin, Apt. 2	<b>Transaction ID:</b> SB21B.37632 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 1 / 2 0 0 8</div> </div>
City Anchorage State AK Zip Code 99508-0000 Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>305.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Arenza Thigpen Mailing Address 601 N. Klevin, Apt. 2	<b>Transaction ID:</b> SB21B.37633 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 6 / 2 0 0 8</div> </div>
City Anchorage State AK Zip Code 99508-0000 Purpose of Disbursement Ballot Access Petitioning Expense Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>1120.13</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

1921.91

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 262 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Arenza Thigpen

Mailing Address 601 N. Klevin, Apt. 2

City  
Anchorage

State  
AK

Zip Code  
99508-0000

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.37634

Date of Disbursement

07 / 17 / 2008

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Arenza Thigpen

Mailing Address 601 N. Klevin, Apt. 2

City  
Anchorage

State  
AK

Zip Code  
99508-0000

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.37635

Date of Disbursement

07 / 18 / 2008

Amount of Each Disbursement this Period

195.00

C.

Full Name (Last, First, Middle Initial)

Ticketmaster

Mailing Address 1601 Elm St., Ste. 700

City  
Dallas

State  
TX

Zip Code  
75201-0000

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.37749

Date of Disbursement

07 / 31 / 2008

Amount of Each Disbursement this Period

51.31

SUBTOTAL of Disbursements This Page (optional) .....

496.31

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 263 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

US LEC Corp.

Mailing Address PO Box 601310

City  
Charlotte

State  
NC

Zip Code  
28260-1310

Purpose of Disbursement  
Phone and Data Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37777

Date of Disbursement

07 / 01 / 2008

Amount of Each Disbursement this Period

837.64

B.

Full Name (Last, First, Middle Initial)

US LEC Corp.

Mailing Address PO Box 601310

City  
Charlotte

State  
NC

Zip Code  
28260-1310

Purpose of Disbursement  
Phone and Data Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37751

Date of Disbursement

07 / 23 / 2008

Amount of Each Disbursement this Period

1131.93

C.

Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address PO Box 25505

City  
Lehigh Valley

State  
PA

Zip Code  
18002-5505

Purpose of Disbursement  
Phone and Data Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37752

Date of Disbursement

07 / 03 / 2008

Amount of Each Disbursement this Period

222.59

SUBTOTAL of Disbursements This Page (optional) .....

2192.16

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 264 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Virginia Dept. of Taxation	<b>Transaction ID:</b> SB21B.37753 <b>Date of Disbursement</b>
Mailing Address PO Box 26644	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 8 / 2 0 0 8</div> </div>
City Richmond State VA Zip Code 23261-6644	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement VA - Withholding Candidate Name	<div> <div>325.00</div> <div>001</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Virginia Dept. of Taxation	<b>Transaction ID:</b> SB21B.37754 <b>Date of Disbursement</b>
Mailing Address PO Box 26644	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 2 / 2 0 0 8</div> </div>
City Richmond State VA Zip Code 23261-6644	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement VA - Withholding Candidate Name	<div> <div>322.00</div> <div>001</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Warner, Norcross & Judd	<b>Transaction ID:</b> SB21B.37755 <b>Date of Disbursement</b>
Mailing Address 1900 Fifth Third Center 111 Lyon Street NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 0 8</div> </div>
City Grand Rapids State MI Zip Code 49503-2487	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Legal Services Candidate Name	<div> <div>2625.00</div> <div>001</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**3272.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 265 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Washington Cable

Mailing Address 700 Seventh St SW

City  
Washington

State  
DC

Zip Code  
20024-2484

Purpose of Disbursement  
Cable Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37756

Date of Disbursement

07 / 15 / 2008

Amount of Each Disbursement this Period

330.00

B.

Full Name (Last, First, Middle Initial)

Len Weisberg

Mailing Address 4000 SE 82nd Ave  
1000 PMB 149

City  
Portland

State  
OR

Zip Code  
97266-0000

Purpose of Disbursement  
Ballot Access Petitioning Expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37637

Date of Disbursement

07 / 10 / 2008

Amount of Each Disbursement this Period

560.50

C.

Full Name (Last, First, Middle Initial)

Worldwide Express - DHL

Mailing Address 1911 North Ft. Myer Dr. Ste 108

City  
Arlington

State  
VA

Zip Code  
22209-0000

Purpose of Disbursement  
Shipping Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37757

Date of Disbursement

07 / 03 / 2008

Amount of Each Disbursement this Period

411.60

SUBTOTAL of Disbursements This Page (optional) .....

1302.10

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 266 / 284

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Worldwide Express - DHL

Mailing Address 1911 North Ft. Myer Dr. Ste 108

City  
Arlington

State  
VA

Zip Code  
22209-0000

Purpose of Disbursement  
Shipping Services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.37758

Date of Disbursement

07 / 15 / 2008

Amount of Each Disbursement this Period

442.48

SUBTOTAL of Disbursements This Page (optional) .....

442.48

TOTAL This Period (last page this line number only) .....

219660.23

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 267 / 284

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Barr 2008 Presidential Committee	<b>Transaction ID:</b> SB23.37863 <b>Date of Disbursement</b>																				
Mailing Address PO Box 725007	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	9		2	0	0	8												
City Atlanta State GA Zip Code 31139	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement In-Kind contribution (See Attached Memo)	<table border="1"> <tr> <td>377.11</td> </tr> </table>	377.11																			
377.11																					
Candidate Name BOB BARR	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Andrew R Davis	<b>Transaction ID:</b> SB23.37863.0 <b>Date of Disbursement</b>																				
Mailing Address 1639 Longleaf Dr.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	9		2	0	0	8												
City Myrtle Beach State SC Zip Code 29575-5400	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement In-kind Contribution (See Memo)	<table border="1"> <tr> <td>377.11</td> </tr> </table>	377.11																			
377.11																					
Candidate Name Barr 2008 Presidential Committee	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Barr 2008 Presidential Committee	<b>Transaction ID:</b> SB23.37867 <b>Date of Disbursement</b>																				
Mailing Address PO Box 725007	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	9		2	0	0	8												
City Atlanta State GA Zip Code 31139	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement In-Kind contribution (See Attached Memo)	<table border="1"> <tr> <td>24.21</td> </tr> </table>	24.21																			
24.21																					
Candidate Name BOB BARR	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional) .....

401.32

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 268 / 284

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE**A.** Full Name (Last, First, Middle Initial)  
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code  
St. Louis MO 63197-0030Purpose of Disbursement  
In-kind Contribution (See Memo)Candidate Name  
Barr 2008 Presidential Committee011  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☒ President  
Disbursement For: 2008 ☐ Primary ☒ General  
Other (specify) ▼  
State: District:

Transaction ID: SB23.37867.0

Date of Disbursement

M M / D D / Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Amount of Each Disbursement this Period

24.21

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
Barr 2008 Presidential Committee

Mailing Address PO Box 725007

City State Zip Code  
Atlanta GA 31139Purpose of Disbursement  
In-Kind contribution (See Attached Memo)Candidate Name  
BOB BARR011  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☒ President  
Disbursement For: 2008 ☐ Primary ☒ General  
Other (specify) ▼  
State: District: 00

Transaction ID: SB23.37865

Date of Disbursement

M M / D D / Y Y Y Y  
0 7 / 2 3 / 2 0 0 8

Amount of Each Disbursement this Period

377.11

**C.** Full Name (Last, First, Middle Initial)  
Andrew R Davis

Mailing Address 1639 Longleaf Dr.

City State Zip Code  
Myrtle Beach SC 29575-5400Purpose of Disbursement  
In-kind Contribution (See Memo)Candidate Name  
Barr 2008 Presidential Committee011  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☒ President  
Disbursement For: 2008 ☐ Primary ☒ General  
Other (specify) ▼  
State: District:

Transaction ID: SB23.37865.0

Date of Disbursement

M M / D D / Y Y Y Y  
0 7 / 2 3 / 2 0 0 8

Amount of Each Disbursement this Period

377.11

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

377.11

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 269 / 284

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Barr 2008 Presidential Committee

Mailing Address PO Box 725007

City  
AtlantaState  
GAZip Code  
31139Purpose of Disbursement  
In-Kind contribution (See Attached Memo)Candidate Name  
BOB BARR011  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☒ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District: 00

Transaction ID: SB23.37869

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	0	8

Amount of Each Disbursement this Period

24.21

**B.**

Full Name (Last, First, Middle Initial)

Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City  
St. LouisState  
MOZip Code  
63197-0030Purpose of Disbursement  
In-kind Contribution (See Memo)Candidate Name  
Barr 2008 Presidential Committee011  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☒ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.37869.0

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	0	8

Amount of Each Disbursement this Period

24.21

**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

24.21

TOTAL This Period (last page this line number only) .....

802.64

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 270 / 284

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 Advanced Mailing Services, LLC

 Nature of Debt (Purpose):  
 Non Candidate Party Print-  
 ing/Mailing

Mailing Address 14970 Farm Creek Drive

City	State	ZIP Code
Woodbridge	VA	22191-3550

Outstanding Balance Beginning This Period

3000.09

Transaction ID: SD10.32279

Amount Incurred This Period

0.00

Payment This Period

3000.09

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 Advanced Mailing Services, LLC

 Nature of Debt (Purpose):  
 Non Candidate Party Print-  
 ing/Mailing

Mailing Address 14970 Farm Creek Drive

City	State	ZIP Code
Woodbridge	VA	22191-3550

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.37880

Amount Incurred This Period

3028.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3028.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 Arcade Press

 Nature of Debt (Purpose):  
 Non Candidate Party Mail-  
 ing Service

Mailing Address 5436 Harford Rd.

City	State	ZIP Code
Baltimore	MD	21214-2292

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.37881

Amount Incurred This Period

710.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

710.00

1) **SUBTOTALS** This Period This Page (optional).....

3738.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 271 / 284

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Darryl BonnerNature of Debt (Purpose):  
Ballot Access Petitioning  
Expense

Mailing Address 6151 Reach Street

City State ZIP Code  
Philadelphia PA 19111-0000

Outstanding Balance Beginning This Period

6112.00

Transaction ID: SD10.32281

Amount Incurred This Period

0.00

Payment This Period

6112.00

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Hickey, Michael P. & AssociatesNature of Debt (Purpose):  
Writing for Non Candidate  
Mailing

Mailing Address 9522 Nassington Ct.

City State ZIP Code  
Richmond VA 23229-6057

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.37885

Amount Incurred This Period

1000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
InTown SuitesNature of Debt (Purpose):  
Staff Travel-HotelMailing Address 2727 Paces Ferry Road  
Suite 2-1200City State ZIP Code  
Atlanta GA 30339-0000

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.37886

Amount Incurred This Period

1090.15

Payment This Period

0.00

Outstanding Balance at Close of This Period

1090.15

1) **SUBTOTALS** This Period This Page (optional).....

2090.15

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 272 / 284

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
LIBERTARIAN NATIONAL COMMITTEE**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Mark PickensNature of Debt (Purpose):  
Ballot Access Petitioning  
Expense

Mailing Address 167 Noterndame Ave 2nd Fl

City State ZIP Code  
Manchester NH 03132-3941

Outstanding Balance Beginning This Period

16451.89

Transaction ID: SD10.32282

Amount Incurred This Period

0.00

Payment This Period

8525.89

Outstanding Balance at Close of This Period

7926.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
US LEC Corp.Nature of Debt (Purpose):  
Phone and Data Services

Mailing Address PO Box 601310

City State ZIP Code  
Charlotte NC 28260-1310

Outstanding Balance Beginning This Period

837.64

Transaction ID: SD10.32283

Amount Incurred This Period

0.00

Payment This Period

837.64

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
US LEC Corp.Nature of Debt (Purpose):  
Tele-Data Services

Mailing Address PO Box 601310

City State ZIP Code  
Charlotte NC 28260-1310

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.37887

Amount Incurred This Period

1133.49

Payment This Period

0.00

Outstanding Balance at Close of This Period

1133.49

**1) SUBTOTALS** This Period This Page (optional).....

9059.49

**2) TOTALS** This Period (last page this line number only).....

14887.64

**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

14887.64

Form/Schedule: **F3XN**

Transaction ID:

The Committee wishes to disclose the following: 1) No expenditures designated on Schedule B supporting Line 21b were made on behalf of any specifically identified federal candidate. 2) The Libertarian National Committee (LNC) requests address, employer, and occupation information from all contributors whose yearly aggregate contributions exceed \$200.00 and informs them of the requirement of complying with 11 CFR 104.7(b)(1). In the event that the information is not supplied as a result of the initial request, Committee makes a subsequent attempt to collect the information by mail, email, or telephone contact within 30 days of the initial contribution. This 'follow up' request a) clearly asks for the missing information without requesting a contribution, b) informs the contributor of the requirements for reporting such information under federal law, and c) is enclosed with a pre-addressed envelope when sent by postal mail. If the information is submitted after the initial monthly report is filed, the contributor master file is updated and the information is updated in memo entries filed with the next regularly scheduled report. The Committee also makes periodic requests during the year for all contributors to update their contact information and for contributors whose yearly contributions aggregate to more than \$200 to update their Employer/Occupation information.

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.37951**

Additional information received as the result of Treasurer's Best Efforts. Original transaction disclosed in 2008 June Monthly, Schedule A Line 11(a)(i), Transaction ID# SA11AI.22842

**Image# 28991905065**

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.37941**

Additional information received as the result of Treasurer's Best Efforts. Original transaction disclosed in 2008 March Monthly, Schedule A Line 11(a)(i), Transaction ID# SA11AI.11394

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.37947**

Additional information received as the result of Treasurer's Best Efforts. Original transaction disclosed in 2008 April Monthly, Schedule A Line 11(a)(i), Transaction ID# SA11AI.15802.

\*\*\*\*\*

**Image# 28991905066**

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.37944**

Additional information received as the result of Treasurer's Best Efforts. Original transaction disclosed in 2008 May Monthly, Schedule A Line 11(a)(i), Transaction ID# SA11AI.20259.

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.37948**

Additional information received as the result of Treasurer's Best Efforts. Original transaction disclosed in 2008 June Monthly, Schedule A Line 11(a)(i), Transaction ID# SA11AI.24576.

\*\*\*\*\*

Image# 28991905067

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.37896**

This entry is made to reattribute a contribution that was made in the form of a check containing the names of Ms. Melinda Moore and Mr. William Redpath, who are husband and wife. The contribution was inadvertently attributed to Ms. Moore, although the Committee subsequently realized that the check was signed by Mr. Redpath only. The parties have requested that all but \$25 of the original contribution be reattributed to Mr. Redpath. There has not been an excessive contribution made by either party. Please see the May Monthly 2008 report, Schedule A, supporting line 11(a)(i), Transaction ID SA11AI.20748 for the original transaction.

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.37899**

This entry is made to reattribute a contribution that was made in the form of a check containing the names of Ms. Melinda Moore and Mr. William Redpath, who are husband and wife. The contribution was inadvertently attributed to Ms. Moore, although the Committee subsequently realized that the check was signed by Mr. Redpath only. The parties have requested that the entire amount of the original contribution be reattributed to Mr. Redpath. There has not been an excessive contribution made by either party. Please see the May Monthly 2008 report, Schedule A, supporting line 11(a)(i), Transaction ID SA11AI.20749 for the original transaction.

\*\*\*\*\*

Image# 28991905068

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.37902**

This entry is made to reattribute a contribution that was made in the form of a check containing the names of Ms. Melinda Moore and Mr. William Redpath, who are husband and wife. The contribution was inadvertently attributed to Ms. Moore, although the Committee subsequently realized that the check was signed by Mr. Redpath only. The parties have requested that the entire amount of the original contribution be reattributed to Mr. Redpath. There has not been an excessive contribution made by either party. Please see the May Monthly 2008 report, Schedule A, supporting line 11(a)(i), Transaction ID SA11AI.20750 for the original transaction.

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.37910**

This entry is made to reattribute a contribution that was made in the form of a check containing the names of Ms. Melinda Moore and Mr. William Redpath, who are husband and wife. The contribution was inadvertently attributed to Ms. Moore, although the Committee subsequently realized that the check was signed by Mr. Redpath only. The parties have requested that the entire amount of the original contribution be reattributed to Mr. Redpath. There has not been an excessive contribution made by either party. Please see the May Monthly 2008 report, Schedule A, supporting line 11(a)(i), Transaction ID SA11AI.25149 for the original transaction.

\*\*\*\*\*

Image# 28991905069

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.37913**

This entry is made to reattribute a contribution that was made in the form of a check containing the names of Ms. Melinda Moore and Mr. William Redpath, who are husband and wife. The contribution was inadvertently attributed to Ms. Moore, although the Committee subsequently realized that the check was signed by Mr. Redpath only. The parties have requested that the entire amount of the original contribution be reattributed to Mr. Redpath. There has not been an excessive contribution made by either party. Please see the June Monthly 2008 report, Schedule A, supporting line 11(a)(i), Transaction ID SA11AI.25150 for the original transaction.

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.37916**

This entry is made to reattribute a contribution that was made in the form of a check containing the names of Ms. Melinda Moore and Mr. William Redpath, who are husband and wife. The contribution was inadvertently attributed to Ms. Moore, although the Committee subsequently realized that the check was signed by Mr. Redpath only. The parties have requested that the entire amount of the original contribution be reattributed to Mr. Redpath. There has not been an excessive contribution made by either party. Please see the July Monthly 2008 report, Schedule A, supporting line 11(a)(i), Transaction ID SA11AI.30143 for the original transaction.

\*\*\*\*\*

Image# 28991905070

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.37897**

This entry is made to reattribute a contribution that was made in the form of a check containing the names of Ms. Melinda Moore and Mr. William Redpath, who are husband and wife. The contribution was inadvertently attributed to Ms. Moore, although the Committee subsequently realized that the check was signed by Mr. Redpath only. The parties have requested that all but \$25 of the original contribution be reattributed to Mr. Redpath. There has not been an excessive contribution made by either party. Please see the May Monthly 2008 report, Schedule A, supporting line 11(a)(i), Transaction ID SA11AI.20748 for the original transaction.

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.37900**

This entry is made to reattribute a contribution that was made in the form of a check containing the names of Ms. Melinda Moore and Mr. William Redpath, who are husband and wife. The contribution was inadvertently attributed to Ms. Moore, although the Committee subsequently realized that the check was signed by Mr. Redpath only. The parties have requested that the entire amount of the original contribution be reattributed to Mr. Redpath. There has not been an excessive contribution made by either party. Please see the May Monthly 2008 report, Schedule A, supporting line 11(a)(i), Transaction ID SA11AI.20749 for the original transaction.

\*\*\*\*\*

Image# 28991905071

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.37903**

This entry is made to reattribute a contribution that was made in the form of a check containing the names of Ms. Melinda Moore and Mr. William Redpath, who are husband and wife. The contribution was inadvertently attributed to Ms. Moore, although the Committee subsequently realized that the check was signed by Mr. Redpath only. The parties have requested that the entire amount of the original contribution be reattributed to Mr. Redpath. There has not been an excessive contribution made by either party. Please see the May Monthly 2008 report, Schedule A, supporting line 11(a)(i), Transaction ID SA11AI.20750 for the original transaction.

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.37911**

This entry is made to reattribute a contribution that was made in the form of a check containing the names of Ms. Melinda Moore and Mr. William Redpath, who are husband and wife. The contribution was inadvertently attributed to Ms. Moore, although the Committee subsequently realized that the check was signed by Mr. Redpath only. The parties have requested that the entire amount of the original contribution be reattributed to Mr. Redpath. There has not been an excessive contribution made by either party. Please see the June Monthly 2008 report, Schedule A, supporting line 11(a)(i), Transaction ID SA11AI.20750 for the original transaction.

\*\*\*\*\*

Image# 28991905072

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.37914**

This entry is made to reattribute a contribution that was made in the form of a check containing the names of Ms. Melinda Moore and Mr. William Redpath, who are husband and wife. The contribution was inadvertently attributed to Ms. Moore, although the Committee subsequently realized that the check was signed by Mr. Redpath only. The parties have requested that the entire amount of the original contribution be reattributed to Mr. Redpath. There has not been an excessive contribution made by either party. Please see the June Monthly 2008 report, Schedule A, supporting line 11(a)(i), Transaction ID SA11AI.25150 for the original transaction.

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.37917**

This entry is made to reattribute a contribution that was made in the form of a check containing the names of Ms. Melinda Moore and Mr. William Redpath, who are husband and wife. The contribution was inadvertently attributed to Ms. Moore, although the Committee subsequently realized that the check was signed by Mr. Redpath only. The parties have requested that the entire amount of the original contribution be reattributed to Mr. Redpath. There has not been an excessive contribution made by either party. Please see the July Monthly 2008 report, Schedule A, supporting line 11(a)(i), Transaction ID SA11AI.30143 for the original transaction.

\*\*\*\*\*

**Image# 28991905073**

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.37943**

Additional information received as the result of Treasurer's Best Efforts. Original transaction disclosed in 2008 May Monthly, Schedule A Line 11(a)(i), Transaction ID# SA11AI.21229

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.37942**

Additional information received as the result of Treasurer's Best Efforts. Original transaction disclosed in 2008 April Monthly, Schedule A Line 11(a)(i), Transaction ID# SA11AI.17094.

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Image# 28991905074

Form/Schedule: **SB23**

Transaction ID: **SB23.37863.0**

Mr. Davis is an employee of the Libertarian National Committee who is also working with the Barr 2008 Presidential Committee part-time while being compensated by the Libertarian National Committee. The Committee estimates that one-third of Mr. Davis' time is spent working for the Barr 2008 Presidential Committee and two-thirds of Mr. Davis' time is spent working for the Libertarian National Committee. This entry represents the allocation of Mr. Davis' salary.

Form/Schedule: **SB23**

Transaction ID: **SB23.37867.0**

Mr. Davis is an employee of the Libertarian National Committee who is also working with the Barr 2008 Presidential Committee part-time while being compensated by the Libertarian National Committee. The Committee estimates that one-third of Mr. Davis' time is spent working for the Barr 2008 Presidential Committee and two-thirds of Mr. Davis' time is spent working for the Libertarian National Committee. This entry represents the allocation of Mr. Davis' employer payroll taxes.

\*\*\*\*\*

Image# 28991905075

Form/Schedule: **SB23**

Transaction ID: **SB23.37865.0**

Mr. Davis is an employee of the Libertarian National Committee who is also working with the Barr 2008 Presidential Committee part-time while being compensated by the Libertarian National Committee. The Committee estimates that one-third of Mr. Davis' time is spent working for the Barr 2008 Presidential Committee and two-thirds of Mr. Davis' time is spent working for the Libertarian National Committee. This entry represents the allocation of Mr. Davis' salary.

Form/Schedule: **SB23**

Transaction ID: **SB23.37869.0**

Mr. Davis is an employee of the Libertarian National Committee who is also working with the Barr 2008 Presidential Committee part-time while being compensated by the Libertarian National Committee. The Committee estimates that one-third of Mr. Davis' time is spent working for the Barr 2008 Presidential Committee and two-thirds of Mr. Davis' time is spent working for the Libertarian National Committee. This entry represents the allocation of Mr. Davis' employer payroll taxes.

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